

MEETING:	Cabinet
DATE:	Wednesday 17 August 2022
TIME:	10.00 am
VENUE:	Council Chamber, Barnsley Town Hall
PUBLIC WEB LINK:	https://barnsley.public-i.tv/core/portal/webcasts

AGENDA

1. Declaration of pecuniary and non-pecuniary interests
2. Leader - Call-in of Cabinet decisions

Minutes

3. Minutes of the previous meeting held on 27 July 2022 (Cab.17.8.2022/3)
(Pages 3 - 6)

Items for Noting

4. Decisions of Cabinet Spokespersons (Cab.17.8.2022/4) (Pages 7 - 8)

Petitions

5. Petitions received under Standing Order 44 (Cab.17.8.2022/5)

Items for Decision/Recommendation to Council

Overview and Scrutiny Report

6. Draft Scrutiny Work Programme for the 2022-23 Municipal Year
(Cab.17.8.2022/6) (Pages 9 - 16)

Children's Spokesperson

7. Annual Report of the Barnsley Local Safeguarding Children Partnership (2021/22)
(Cab.17.8.2022/7) (Pages 17 - 66)
8. Barnsley Draft Children in Care and Care Leavers Strategy (2022-25)
(Cab.17.8.2022/8) (Pages 67 - 92)

Place Health and Adult Social Care Spokesperson

9. Barnsley Safeguarding Adult Board Annual Report 2021-22 (Cab.17.8.2022/9)
(Pages 93 - 122)

Environment and Highways Spokesperson

10. Contract Award for the Management of Household Waste Recycling Centres
(HWRC) (Cab.17.8.2022/10) (Pages 123 - 136)

Public Health and Communities Spokesperson

11. Recommissioning of Services for People with Multiple Needs (aged 16-24 years)
 (Cab.17.8.2022/11) (Pages 137 - 176)

To: Chair and Members of Cabinet:-

Councillors Houghton CBE (Chair), T. Cave, Frost, Gardiner, Higginbottom, Howard, Lamb, Makinson and Platts

Cabinet Support Members:

Councillors Cain, Cherryholme, Eastwood, Franklin, Newing, Osborne and Risebury

Chair of Overview and Scrutiny Committee

Chair of Audit Committee

Sarah Norman, Chief Executive

Carly Speechley, Executive Director Children's Services

Wendy Lowder, Executive Director Place Health and Adult Social Care for Barnsley

Shokat Lal, Executive Director Core Services

Matt O'Neill, Executive Director Growth and Sustainability

Julia Burrows, Executive Director Public Health and Communities

Neil Copley, Service Director Financial Services (Section 151 Officer)

Sukdave Ghuman, Service Director Law and Governance (Monitoring Officer)

Michael Potter, Service Director Business Improvement, HR and Communications

Katie Rogers, Head of Communications and Marketing

Anna Marshall, Scrutiny Officer

Jason Field, Head of Legal Services (Deputy Monitoring Officer)

Corporate Communications and Marketing

Please contact Sukdave Ghuman on email governance@barnsley.gov.uk

Tuesday 9 August 2022



MEETING:	Cabinet
DATE:	Wednesday 27 July 2022
TIME:	10.00 am
VENUE:	Council Chamber, Barnsley Town Hall

MINUTES

Present Councillors Houghton CBE (Chair), T. Cave, Frost, Gardiner, Higginbottom, Howard, Lamb, Makinson and Platts

Members in Attendance: Councillors Cain, Eastwood, Franklin, Newing and Osborne

48. Declaration of pecuniary and non-pecuniary interests

There were no declarations of pecuniary or non-pecuniary interests.

49. Leader - Call-in of Cabinet decisions

The Leader reported that no decisions from the previous meeting held on 13 July 2022 had been called in.

50. Minutes of the previous meeting held on 13 July 2022 (Cab.27.7.2022/3)

The minutes of the meeting held on 13 July 2022 were taken as read and signed by the Chair as a correct record.

51. Decisions of Cabinet Spokespersons (Cab.27.7.2022/4)

There were no Records of Decisions by Cabinet Spokespersons under delegated powers to report.

52. Petitions received under Standing Order 44 (Cab.27.7.2022/5)

RESOLVED that the report notifying the receipt of the following petitions be noted and the recommended actions for responding to them be endorsed:-

- (a) Containing the signatures of 1,104 signatories* (comprising 883 within Borough and 221 outside), in respect of speeding Vehicles on A635 dual carriageway at Stairfoot and Ardsley, Barnsley:-

The introduction of average speed cameras has not been supported as the current criteria set by the Department for Transport for Speed camera implementation has not been met. BMBC recently installed 20mph Speed Limit signs on Doncaster Road in the vicinity of Oakhill Primary School. BMBC are developing a new Active Travel route along the A635 and three pedestrian / cycle crossings will be provided as part of that scheme. It is recommended that the traffic team will also undertake an assessment before the end of July, to determine whether additional signs could be appropriate to manage the road. The Head of Highways, Engineering and Transportation write to the lead

petitioner to explain the situation and address the concerns of the petitioners.

*It was noted that an additional 355 signatures from the Stairfoot and Ardsley area had been obtained further to the petition being submitted, taking the total to 1,238.

53. Adult Social Care Fee Uplift 2022/23 (Community-Based Support including Residential and Specialist Provision) (Cab.27.7.2022/6)

RESOLVED that Cabinet notes the approach taken in respect of the various community support provision and approves the uplift in fees for 2022/23 as outlined in section 4 of the report.

54. Safeguarding Adults Peer Review Findings (Cab.27.7.2022/7)

RESOLVED that Cabinet:-

1. Accepts the report, noting the areas of strength and recommendations; and
2. Notes that the recommendations will be monitored by the Barnsley Safeguarding Adults Board (BSAB).

55. Response to the Overview and Scrutiny Committee Task and Finish Group Report on Air Quality and Carbon Reduction (Cab.27.7.2022/8)

RESOLVED that Cabinet endorses the conclusions and recommendations set out in the report as a result of the TFG's review of air quality and carbon reduction.

56. Smoke and Carbon Monoxide Alarm (Amendment) Regulations (Cab.27.7.2022/9)

RESOLVED that Cabinet: -

1. Approves the installation of additional Smoke & Carbon Monoxide Alarms (where required) through a planned programme of works to complete by 1 October 2022. The programme has an estimated cost of £2.83; and
2. Approves the reallocation of Berneslai Homes reserves, from Housing Growth Reserves, to fund the estimated increase in costs.

57. Exclusion of Public and Press

RESOLVED it was reported that the appendix to the report at item number 11 (Proposed new lease of the former Co-op Store, King Street, Hoyland) was not available to the public and press because it contained exempt information described in Paragraph 3 of Part 1 of Schedule 12A of the Local Government Act 1972 (as amended), relating to the financial or business affairs of any particular person.

Accordingly, if the content of the appendix was to be discussed, the public and press would be excluded from the meeting.

**58. Proposed New Lease of the former Co-op Store, King Street, Hoyland
(Cab.27.7.2022/11)**

RESOLVED that Cabinet:-

1. Approves the terms reported in respect of the proposed new sub-lease of the former Co-op store, King Street, Hoyland; and
2. Grants a sub-lease for a term of 10 years at a peppercorn rent.

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Chair

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BARNSELY METROPOLITAN BOROUGH COUNCIL

CABINET SPOKESPERSONS' DECISIONS

Schedule of Decisions taken for week ending 22 July 2022

<u>Cabinet Spokesperson</u>	<u>Item</u>	<u>Decisions</u>
1. Regeneration and Culture	Reconfiguration of Commerce House as a Children's and Young People's Hub	<ol style="list-style-type: none">1. The Cabinet Spokesperson approves the business case to proceed with the project as agreed by Capital Oversight Board on 8 June 2022. With the estimated overall cost of £398,048.2. Delegated authority is given to the Service Director Regeneration and Culture to oversee and approve procurement and change management activities relating to the project.

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BARNSELY METROPOLITAN BOROUGH COUNCIL

REPORT OF: EXECUTIVE DIRECTOR, CORE SERVICES

TITLE: DRAFT SCRUTINY WORK PROGRAMME FOR THE 2022-23 MUNICIPAL YEAR

REPORT TO:	CABINET
Date of Meeting	17 August 2022
Cabinet Member Portfolio	Not Applicable
Key Decision	No
Public or Private	Public

Purpose of report

To outline the proposed draft work programme for 2022/23 for the Overview & Scrutiny Committee (OSC) and its three Task & Finish Groups (TFGs).

Council Plan priority

Growing Barnsley
Sustainable Barnsley
Healthy Barnsley
Learning Barnsley
Enabling Barnsley

Recommendations

That Cabinet:-

1. Note the proposed draft Scrutiny Work Programme for 2022/23 as outlined in sections 2.3 and 2.4 of this report whilst acknowledging that this is subject to change should any urgent issues arise.

1. INTRODUCTION

- 1.1 Scrutiny was introduced in the Local Government Act 2000 (following the abolition of the old committee structure) as a means to hold the new council cabinets to account for the decisions they make. Since then, subsequent acts of parliament have bolstered Scrutiny by extending its remit (and its statutory

responsibilities) beyond the council to the work of partner organisations as well. Much of this legislation was consolidated in the Localism Act 2011. This includes Overview and Scrutiny having a specific role in exercising the Authority's powers in relation to the scrutiny of health services and the crime and disorder partnership in the borough.

- 1.2 The need for sound effective decision making is critical, especially as we continue to respond to, and recover from, the global COVID-19 pandemic which has had, and will continue to have, a profound impact on individuals, communities and services. Elected members who sit on Barnsley's scrutiny committee have a vital role to play as 'scrutineers', providing a valid mechanism of challenge to performance, monitoring decision making and to ensure value for money is delivered.
- 1.3 Barnsley Council's scrutiny arrangements continue to incorporate an OSC of 34 Councillors plus a Parent Governor Co-optee. The OSC meets formally 12 times per year in total; three of these meetings are in plenary mode to which all 34 committee members attend. For the remaining nine meetings, each committee member allocates time to one of three workstreams which each meet three times per year consisting of 12 Elected Members (including the Chair). However, although members are assigned to a specific workstream they do have an open invitation to attend the meetings of other workstreams as well, if they so wish.
- 1.4 To support the work of the organisation and to ensure that the committee can hold decision makers to account, the workstreams of the committee have been aligned to three of the council's priorities:-
 - Sustainable Barnsley
 - Growing Barnsley
 - Healthy Barnsley
- 1.5 The Full Committee will ensure that responsibility for key strategic issues is shared across all Members. This includes overall performance/inspections of both the Council and partner agencies; substantial NHS changes and consultations; and challenging the safeguarding of our most vulnerable, incorporating the children's social care performance report which is scrutinised as part of a private member briefing. These full committee meetings also incorporate the Council's 'Learning Barnsley' priority given that the full committee annually considers education attainment across the borough.
- 1.6 As the Council's 'Enabling Barnsley' theme cuts across all priorities, topics for this area could be covered by any of the workstreams or full committee, whichever is deemed most appropriate.
- 1.7 In addition to the 12 meetings of the full committee and workstreams, the OSC will also maintain three Member-led task and finish groups to carry out in-depth investigations.
- 1.8 The OSC and its TFGs are responsible for not only holding the Council to account but also for scrutinising the performance of both the Council and its

partners to determine whether they are delivering the intended outcomes. In relation to safeguarding business, the majority of this work will be undertaken by committee members in plenary sessions. However, safeguarding considerations will also be a feature of all workstreams as appropriate to ensure services are protecting the most vulnerable and to ensure that they are achieving the outcome that 'people are safe and feel safe'. This particularly relates to the 'Healthy Barnsley Workstream' which will be scrutinising the adult social care performance report in a private member briefing and this will become embedded into the work programme cycle so that it is presented to the committee at least annually.

- 1.9 In addition to borough-wide scrutiny, Area Councils can undertake local investigations and invite internal and external services to discuss any concerns. The Area Councils can also feed any areas of concern and recommendations to the OSC and its TFGs. The OSC Chair meets with the Area Council Chairs periodically to liaise regarding topics on the OSC work programme and ensure any relevant concerns are raised.
- 1.10 The topics proposed in paragraphs 2.3 and 2.4 of this report are a reflection of input into the work programme from a variety of sources and stakeholders, including Healthwatch Barnsley, to identify the key issues requiring scrutiny during the 2022/23 municipal year. It is important to note however that the programme may be updated on an ongoing basis should any issues require consideration at short notice.

2. PROPOSAL

- 2.1 The Council's Scrutiny arrangements form an important part of the overall governance and internal control framework. The appetite of the Council to have meaningful and constructive scrutiny of its decisions makes a significant contribution to the transparency and accountability of Council activities.
- 2.2 It is important that the Scrutiny work programme is developed to ensure effective scrutiny of local services to help improve outcomes for local communities. Forward planning is undertaken to identify key issues which require scrutiny during each municipal year, as well as allowing for the work programme to be reactive and evolve should issues require scrutiny at short-notice. Therefore, it is important to note that the proposals below remain subject to change and each suggested investigation will need to be scoped in more detail.
- 2.3 The table below shows the proposed work programme for the OSC and notes when the Council's quarterly performance reports will be available throughout the year should they highlight any issues requiring further investigation:

Meeting Date & Workstream	Topics
2022-23 Municipal Year	
Tues 31 May 2022, 2pm (Sustainable Barnsley)	1. Progress on Road Safety Q4 & Year-End Council Plan Performance Report 2021/22 (Cab 01/06/22)
Tues 28 June 2022, 2pm (Growing Barnsley)	1. Housing & Support Model to Prevent Homelessness
Tues 19 July 2022, 2pm (Healthy Barnsley)	1. Better Lives Programme (Adult Social Care) 2. Private Member Briefing - Adult Social Care Annual Performance Report 2021/22
Tues 13 th September 2022 2pm (Full Committee)	1. Barnsley Safeguarding Adults Board Annual Report 2021-22 2. Barnsley Safeguarding Children Partnership Annual Report 2021-22 3. Private Member Briefing - Children's Social Care Performance Report
Tues 11 th October 2022 2pm (Sustainable Barnsley)	1. Cost of Living Crisis Q1 Council Plan Performance Report 2022/23 (Cab 21/09/22)
Tues 1 st November 2022 2pm (Growing Barnsley)	1. Affordable & Social Housing Provision in Barnsley
Tues 29 th November 2022 2pm (Healthy Barnsley)	1. Progress on the Development of Integrated Care in Barnsley 2. Access to Primary Care
Tues 10 th January 2023 2pm (Full Committee)	1. Provisional Education Outcomes across the Borough 2021/22 including vulnerable groups 2. Private Member Briefing - Children's Social Care Performance Report inc Annual Ofsted Conversation Q2 Council Plan Performance Report 2022/23 (Cab 14/12/22)
Tues 7 th February 2023 2pm (Sustainable Barnsley)	1. Highways Peer Review
Tues 7 th March 2023 2pm (Growing Barnsley)	1. Corporate Communications Strategy Q3 Council Plan Performance Report 2022/23 (Cab 08/03/23)
Tues 21 st March 2023 2pm (Healthy Barnsley)	1. Mental Health Strategy 2. Excess Mortality & Healthy Life Expectancy
Tues 25 th April 2023 2pm (Full Committee)	1. Hospice CQC Report and Action Plan 2. FOR INFORMATION ONLY – 2021/22 TFGs Progress Report 3. Private Member Briefing - Children's Social Care Performance Report
2023-24 Municipal Year	
Tues 30 th May 2023 2pm (Sustainable Barnsley)	1. Climate Change Strategy Q4 & Year-End Council Plan Performance Report 2022/23 (Cab 31/05/23)
Tues 27 th June 2023 2pm (Growing Barnsley)	1. Jobs & Skills
Tues 18 th July 2023 2pm (Healthy Barnsley)	1. Children & Young People's Mental Health Services (CYPMHS) 2. SEND Provision in Barnsley 3. Private Member Briefing - Adult Social Care Annual Performance Report 2022-23

2.4 The table below shows the proposed topics for the Task & Finish Groups:

TFG 1	Sexual and Reproductive Health (Contraception & Teenage Conception Rates)
TFG 2	Inclusive Economy/Good Growth
TFG 3	The Customer Experience

2.5 To advise the OSC and its TFGs with their investigations, on occasion 'Expert Participants' have been invited to contribute to meetings. This is to be able to both advise Members as well as ask questions of their own to witnesses in relation to topics where they have particular expertise, either by profession or service user experience. The committee therefore plans to continue this practice as appropriate on an ongoing basis.

- 2.6 In accordance with legislation and the provision for Local Authorities to form Joint Health Overview and Scrutiny Committees with other Councils to respond to substantial reconfiguration proposals covering more than one council area, the OSC Chair will continue to participate in these as appropriate. These meetings can be convened over varying geographical areas as well as over varying timescales as is deemed appropriate for the matters being considered.

3. IMPLICATIONS OF THE DECISION

3.1 Financial and Risk

There are no specific financial implications arising from this report, however recommendations could be made by the OSC/TFGs as part of their investigations which would require assessment of financial implications by the appropriate services responding which may be the Council or partnership agencies.

The development of an agreed work-programme provides a great deal of focus and control to risks. Additionally, the flexibility built into the work programme provides a robust mitigation in the event of new or emerging issues requiring Scrutiny attention during 2022/23.

3.2 Legal

There are no specific legal implications arising from this report, however recommendations could be made by the OSC/TFGs as part of their investigations which would require assessment of legal implications by the appropriate services responding which may be the Council or partnership agencies.

3.3 Equality

The Equality Act 2010 requires public authorities to pay due regard to the impact of their services, policies, functions and decisions on diverse groups (called “people with protected characteristics” in the Act). For Scrutiny this means ensuring that as part of their investigations they consider how the services or policies affect people from these groups, and ideally ensuring that people with direct experience have an opportunity to have their voices heard. Scrutiny should also seek to understand what steps services have taken to proactively assess the likely equality impact of their service design and delivery and how they have sought to monitor the actual impact once implemented.

By using ‘Expert Participants’ (see paragraph 2.5) the committee will be able to utilise a range of representatives to ensure appropriate challenge to services which will include those from minority groups. This work may require the engagement of the Equality and Inclusion Team, as well as exploring the options for other expert participants from within the community, when appropriate.

3.4 Sustainability

There are no specific sustainability implications arising from this report, however recommendations could be made by the OSC/TFGs as part of their investigations which would require assessment of sustainability implications by the appropriate services responding which may be the Council or partnership agencies.

3.5 Employee

There are no specific employee implications arising from this report, however recommendations could be made by the OSC/TFGs as part of their investigations which would require assessment of employee implications by the appropriate services responding which may be the Council or partnership agencies.

3.6 Communications

It is noted that the work of Scrutiny keeps under review the performance of the Council and other relevant organisations in providing services to Barnsley communities. Proactive communication about these services and activities takes place on a regular, planned basis as part of the communication strategy for each directorate of the Council and on occasion will be requested to be undertaken by other relevant organisations.

Communication is a common thread that runs through all the topics scrutinised by the committee and members often challenge services on how their messages are delivered to Barnsley residents. This year the committee will be scrutinising the Council's Communications Strategy to ensure that it is fit for purpose and fully inclusive, and part of their investigations may have implications for the appropriate services responding.

To allow for robust scrutiny, accountability and transparency, agenda packs are published one week before the date of the meeting and all sessions are held in public with the exception of items that are exempt because the public interest in maintaining confidentiality outweighs the public interest in disclosing the information.

4. CONSULTATION

As the process is member led, topics have been proposed by committee members to reflect issues affecting their communities. Further consultations have also taken place with Area Council Chairs, partners and BLT. A small group of committee members are planning to meet with representatives from the Youth Council, Care4Us Council and the SEND Forum so that members can understand how young people are impacted by the topics and this will then be reflected in the work of the committee moving forward.

5. ALTERNATIVE OPTIONS CONSIDERED

- 5.1 The work programme will be remain in draft form to allow the committee to respond to topics that may arise throughout the year.

6. REASONS FOR RECOMMENDATIONS

- 6.1 The work of the OSC allows for critical friend challenge and amplifies the voices and concerns of the public. The work programme supports continuous service improvement to ensure that the needs of local residents are effectively met; and that the Council can achieve the outcomes identified in the Council Plan and its ambitions for 2030.

7. GLOSSARY

OSC	Overview & Scrutiny Committee
TFG	Task & Finish Group

8. LIST OF APPENDICES

None.

9. BACKGROUND PAPERS

- Council Plan 2021-2024 (Cab.24.3.2021/9):
<https://barnsleymbc.moderngov.co.uk/documents/s77030/Appendix%201.pdf>
- Local Government Act 2000:
<https://www.legislation.gov.uk/ukpga/2000/22/part/1A/chapter/2/crossheading/overview-and-scrutiny-committees>
- Localism Act 2011:
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/5959/1896534.pdf

10. REPORT SIGN OFF

Financial consultation & sign off	Not applicable
Legal consultation & sign off	Not applicable

Report Author: Jane Murphy
Post: Scrutiny Officer
Date: 20 July 2022

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BARNSELY METROPOLITAN BOROUGH COUNCIL

REPORT OF: THE EXECUTIVE DIRECTOR (CHILDREN'S SERVICES)

TITLE: ANNUAL REPORT OF THE BARNSELY LOCAL SAFEGUARDING CHILDREN PARTNERSHIP (2021/2022)

REPORT TO:	CABINET
Date of Meeting	17th AUGUST 2022
Cabinet Member Portfolio	CHILDREN'S SERVICES
Key Decision	No
Public or Private	Public

Purpose of report

To present for Cabinet's consideration the latest annual report of the Barnsley Local Safeguarding Children Partnership (LSCP).

Council Plan priority

The role and responsibilities of the Barnsley LSCP primarily support our priority for a **Healthy Barnsley** and the outcome of ensuring children and young people stay safe from all forms of harm

Recommendations

That Cabinet receives the Annual Report of the Barnsley LSCP and notes the progress made by the LSCP in relation to its statutory role and functions, as part of Cabinet's continued consideration of the Borough's arrangements for safeguarding vulnerable adults and children

1.0 INTRODUCTION

- 1.1 The Children and Social Work Act (2017) followed by the amended statutory guidance for safeguarding children (*"Working Together to Safeguard Children": July 2018*) paved the way for significant changes in responsibilities for safeguarding children and promoting their welfare in local areas.
- 1.2 This included the abolition of local safeguarding children boards and the formal introduction of new multi-agency, safeguarding arrangements. From September 2019, responsibility for safeguarding children and promoting their welfare in the Borough has rested with the three designated, safeguarding

partners identified in Chapter 3 of the Children and Social Work Act (2017) as follows:

- The local authority.
- NHS clinical commissioning group for an area any part of which falls within the local authority area.
- The chief officer of police for any area in which a part falls within the local authority area.

1.3 In Barnsley, these three statutory safeguarding partners have combined to form the Borough LSCP. Whilst the revised statutory guidance applies to all schools and other education providers, they are currently designated as *'relevant agencies'* under the 2017 Act and part of the role of the LSCP is to set out how relevant agencies will comply with this ongoing statutory responsibility within the current local arrangements. Following the enactment of the Health and Care Act (2022) clinical commissioning groups were dissolved and their responsibility within the context of safeguarding children in Barnsley has been taken over by the South Yorkshire Integrated Care Board (South Yorkshire ICB)

1.4 The LSCP is also expected to set out, in writing, how the three statutory local partners will work together and with relevant agencies as well as develop processes and procedures to safeguard children and promote their welfare. This should include reference to the interface with other strategic partnerships, including the Borough's Health and Wellbeing Board, Safeguarding Adults Board and Safer Barnsley Partnership.

1.5 The revised guidance identifies the lead representative for each of the 3 safeguarding partners all of whom will be expected to play an active role. In Barnsley, these are as follows:

- The Executive Director (Children's Services) of the Local Authority as the statutory director of children's services.
- The accountable officer of the Barnsley Clinical Commissioning Group.
- The District Commander for South Yorkshire Police.

All 3 statutory safeguarding partners should have equal and joint responsibility for local safeguarding arrangements. The Cabinet Spokesperson for Children's Services attends meetings and receives all reports of the LSCP both as an observer and as the Borough's statutory Lead Member for Children's Services.

2.0 PROPOSAL

2.1 The revised statutory guidance makes provision for the independent scrutiny of these new, local multi-agency safeguarding arrangements and Cabinet will recall that at its meeting held on 21st April last year, it approved a proposal for a combined Independent Chair and Independent Scrutineer for the Borough's LSCP which became effective during 2021/22.

- 2.2 The revised guidance also states that the designated safeguarding partners should agree an equitable and proportionate level of funding to be derived from each partner to support the new arrangements.
- 2.3 As well as the publication of arrangements for safeguarding children and promoting their welfare, the Barnsley LSCP is also required to publish an annual report on the effectiveness of these arrangements and the progress achieved which should be presented for consideration by the Council's Chief Executive and by Cabinet. The LSCP's latest annual report has been published and is attached as Appendix 1 to this report.
- 2.4 This is the third annual report to be published following the revised, statutory guidance of 2018. It sets out the work of the Partnership in relation to the changes made to local area arrangements for the safeguarding of children and promoting their welfare. This includes the conducting of local child safeguarding practice reviews and child death reviews, together with reporting any instances of child abuse or neglect to the National Child Safeguarding Practice Review Panel as well as informing additional organisations, such as local sports clubs and faith organisations, of their responsibility concerning the safeguarding of young people.
- 2.5 The work of the LSCP focused upon the following 7 Strategic Priorities of the LSCP during 2021/22, namely:
- (1) Reducing the numbers of children harmed by overlay
 - (2) Applying learning derived from local and national child practice reviews in everyday practice
 - (3) A focus by the multi-agency partners upon child neglect and poverty-proofing which recognises the impact of Covid-19 upon Barnsley's communities and the effects of neglect upon children. To promote the use of the 'Graded-Care Profile'
 - (4) To increase the effectiveness and take-up of early help and support to families, particularly among families experiencing poverty and deprivation as we continue to recover from the Covid-19 Pandemic.
 - (5) Implementing the updated statutory guidance on *Keeping Children and Young People Safe in Education* in our schools and settings, particularly in relation to the findings within Ofsted's rapid thematic review of peer upon peer and online sexual abuse.
 - (6) Implementing the revised Borough Anti-Bullying Strategy within schools and settings in response to the concerns of young people and afford better protection from bullying and harassment in their daily lives.
 - (7) To strengthen the engagement and participation of young people in the co-production of local safeguarding strategies and the work of the Partnership

Further detail on the LSCP's Strategic Priorities during this period is outlined in Pages 15-21 of the Annual Report.

2.6 The Annual Report then proceeds to indicate its strategic priorities as we move forward during the period 2022 to 2025. These are summarised as follows:

- Child neglect: Improving outcomes for children and young people at risk of neglect and harm.
- Child exploitation: Improving outcomes for children and young people at risk of exploitation and harm, outside of the home
- Tackling bullying, online harm stalking and harassment
- Further service development and improvement, including the role of the LSCP in supporting early help to families, helping enable children to receive a good start in life and to assure the safety of children within a supportive learning environment.

Further detail on the LSCP's new strategic priorities can be found particularly in Pages 7-8 and Pages 28-34 of the Annual Report.

2.7 More recently, the outcomes of the Independent Review of Children's Social Care included the following recommendations in relation to "*multi-agency (children's) safeguarding partnerships*"

- For central government to clarify the role of multi-agency safeguarding arrangements as a strategic forum. To establish clearer government expectations for the operational aspects of partnership working, with co-ordination and delivery of multi-agency working overseen by the Director of Children's Services.
- Through the *Working Together to Safeguard Children* statutory guidance, to clearly set out the individual contributions of partners within local safeguarding children arrangements in achieving the Independent Review's 'Vision'.
- The Child Safeguarding Practice Review Panel and relevant *What Works* Centres to take a more proactive role in promoting evidence and supporting partnerships to improve.
- Each of the inspectorates who regulate partners within a children's safeguarding partnership should review their inspection framework to ensure there is a sufficient focus on the individual agency's contributions to joint working. Where there are concerns about the functioning of partnerships, joint inspections should be instigated, with a judgement included.
- The education sector should be added as a fourth statutory local safeguarding partner.
- Central government should incentivise greater partner contributions towards supporting local safeguarding arrangements by requiring them to publish their financial contribution and to make receiving full funding for reform contingent on partner contributions.

- 2.8 Local statutory partners are awaiting the Government's final response to the Independent Review's findings and these considerations together with the next steps will form part of next year's annual report
- 2.9 Similarly, the outcomes of the recent Joint Targeted Area Inspection of the multi-agency response to identifying risks and the needs of vulnerable children in need of help and protection in the Borough is to be the subject of a separate, impending report to Cabinet

3. IMPLICATIONS OF THE DECISION

3.1 Financial and Risk

- 3.2 The cost of undertaking the activities of the Barnsley Local Safeguarding Children Partnership (LSCP) in 2021/22 amounts to £140k, and includes related staffing, independent chair costs, business support, etc.
- 3.3 The overall cost is funded from contributions from partner organisations and includes the Council, Barnsley CCG (now replaced by the Barnsley Place Integrated Care Board from 1 July 2022) and the South Yorkshire Police and Crime Commissioner. A breakdown of costs and partner contributions is outlined on Page 22 of the attached Barnsley LSCP annual report.

3.4 Legal

- 3.5 There are no unanticipated legal considerations emerging for the Council through this report. Please also see Section 1 of the report

3.6 Equality

- 3.7 An equality impact assessment concerning the continuing role and responsibilities of the Barnsley LSCP has been prepared and is included as Appendix 2 of this report.

3.8 Sustainability

- 3.9 There are no implications for sustainability in the Borough arising through this report.

3.10 Employee

- 3.11 In Page 16 of the annual report, details are provided on the Barnsley LSCP Multi-Agency Training Programme during 2021/22. This continued to offer rich opportunities for professionals and practitioners involved in safeguarding children and promoting their welfare, to develop their skills and knowledge as part of improving the quality of practice and provision.

3.12 Communications

3.13 There are no direct implications for the Council arising through the Annual Report. In considering communications, within the context of child protection, Cabinet will note that among the policies and procedures to be continually reviewed and developed by the Barnsley LSCP are those aimed at keeping children and young people safe from grooming, exploitation and abuse whilst online

3.14 Equally, through engaging young people on how best they can report or raise concerns with the Partnership, statutory partners' and relevant agencies, relating to their safety or wellbeing, Cabinet is assured that communication channels are in place to enable them to do this on their terms and in ways which are most familiar to them

4. CONSULTATION

4.1 The Senior Management Team has both been consulted and endorsed the progress and achievements outlined in the Annual Report.

5. ALTERNATIVE OPTIONS CONSIDERED

5.1 The purpose of this report is to comply with the provisions of the amended statutory guidance for safeguarding children concerning the production of an annual report by the Barnsley LSCP and its presentation to Cabinet.

6. REASONS FOR RECOMMENDATIONS

6.1 Please see Paragraphs 2.3 and 5.1 of the report.

7. GLOSSARY

7.1 None, applicable.

8. LIST OF APPENDICES

8.1 Appendix 1: Annual Report of the Barnsley Local Safeguarding Children Partnership (2021/22)

Appendix 2: Annual Report of the Barnsley Local Safeguarding Children Partnership (2021/22) Equality Impact Assessment

9. BACKGROUND PAPERS

9.1 If you would like to inspect background papers for this report, please email governance@barnsley.gov.uk so that appropriate arrangements can be made

10 REPORT SIGN OFF

Financial consultation & sign off	Senior Financial Services officer consulted and date <i>Joshua Amahwe (01/08/2022)</i>
Legal consultation & sign off	Legal Services officer consulted and date <i>Jason Field 29/07/22</i>

Report Author: Sophie Wales

Designation: Service Director (Children's Social Care and Safeguarding)

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Annual Report of the Barnsley Local Safeguarding Children Partnership (2021/22)

Introduction

Welcome to the annual report covering the work of the Barnsley Safeguarding Children's Partnership (BSCP) in 2021/22. The report provides an overview of multi-agency safeguarding activity during the year and reflects the hard work and dedication of all our partner agencies as they've safeguarded and promoted the welfare of Barnsley's children and young people. Our shared [Healthy Barnsley 2030](#) ambition is that children and young people have the right support, with early help at the right time. That everyone has the resources they need to look after themselves and their families.

On the backdrop of the pandemic, front line colleagues across the borough showed remarkable ability in adapting their responses to meet the challenges created by the pandemic, and for this we will be forever grateful. We want to thank everyone who continues to go above and beyond to make Barnsley a safer place for children.

Barnsley Safeguarding Children's Partnership demonstrated its ability to respond and to be creative in providing leadership through this difficult time. Our ability to safeguard children and support vulnerable families continued and, moreover, we were able to progress our priorities and strengthen the coordination and efficacy of services.

This year has seen big changes as we've said goodbye to Mel John-Ross, the Executive Director of Children's Services, and to Bob Dyson, the Independent Partnership Chair, and we thank them for their drive, ambition, and hard work on behalf of BSCP and the children and families of Barnsley.

We're in process of reviewing our strategic priorities with wider partners and colleagues, and our governance arrangements to strengthen accountability and oversight of BSCPs activities, and to test the effectiveness of future arrangements. Big changes will also be made following the establishment of Integrated Care Systems within the NHS.

Jean Imray joined BSCP in a new role of Independent Scrutineer in November 2021. The role of the Independent Scrutineer is to act

objectively, as a constructive and critical friend who promotes reflection to drives continuous improvement.

We remain grateful to all partners and their dedicated front-line staff for their support and steadfast commitment to safeguarding all of our children.

Carly Speechley - Executive Director for Children's Services, Barnsley Council

Jayne Sivakumar - Chief Nurse (Barnsley), NHS South Yorkshire Integrated Care Board

Chief Superintendent James Abdy - Barnsley District Commander

Statement from the Independent Scrutineer

Working Together 2018 advises that the decision on how best to implement a robust system of independent scrutiny is to be made locally, but safeguarding partners should ensure that the scrutiny is 'objective, acts as a constructive critical friend and promotes reflection to drive continuous improvement'. The independent scrutineer should 'consider how effectively the arrangements are working for children and families as well as for practitioners, and how well the safeguarding partners are providing strong leadership.'

The role of the independent scrutineer is primarily focussed on how well the three safeguarding partners are working together and with any relevant agencies and organisations, to ensure that local children are safeguarded, and their welfare promoted.

I took up the post of independent scrutineer in November 2021. The BSCP and I agreed that no one person could or should be the only source of scrutiny for an entire safeguarding system and so during the first six months of my tenure, as well as the work I have undertaken directly myself, I have drawn upon a variety of sources of external and internal inspections and reviews as well as audit and scrutiny that has been undertaken across the partnership. [Read my six month report.](#)

Without exception I have found the BSCP executive both open to and welcoming constructive challenge and support. As a result of changes in key personnel, the executive is in many ways still in its infancy and it recognises there is work to do to ensure it matures into a powerful and influential force that facilitates and drives change and improvement across usual institutional and agency constraints and boundaries.

The ambition and commitment of the BSCP to improve the experiences of children and families in Barnsley is impressive, and I am confident it will be matched by a shared determination to accelerate the pace of change so that the positive impact of its work becomes even more evident.

Jean Imray - Independent Scrutineer

Role of the Partnership

The Barnsley Safeguarding Children Partnership (BSCP) brings together the three lead partners (local authority, police and South Yorkshire Integrated Care Board) to plan and to work together with other partners to protect and safeguard children in the local area.

The BSCP was established in 2019 following the Wood Review and the revised Working Together to Safeguard Children (2018).

This report describes some of the work undertaken in April 2021 to March 2022 and considers the effectiveness of the arrangements in a period of tremendous change, as local communities adapt to living with COVID-19. Our aim is to be more effective together than we are as separate agencies, in our shared and equal duty to safeguard and promote the welfare of children and young people of Barnsley.

Partnership Governance Arrangements and Structure

The partnership has strategic leadership in place, initiates effective joint working practices, and gains assurance of the effectiveness of safeguarding arrangements through the structure and the activities of subgroups and partnership bodies, including arrangements to identify and review serious child safeguarding cases. It links in with the important work of other partnerships across Barnsley, including those that bring the voices of children and young people.

A review of our governance arrangements is underway. With the support of the Independent Scrutineer, a structured executive group is now in place. Meetings have increased in number and duration. A new strategic multi-agency safeguarding hub (MASH) group reports directly to the executive. Subgroups are being restructured to deliver on our strategic priorities. The full set of changes come into place in October 2022.

Independent Scrutiny

As well as the challenge and oversight brought through the new independent scrutineer role in November 2021, elected members attend the BSCP, as representatives of the local community. This annual report will be considered by the BMBC Scrutiny and Oversight Committee.

The partnership is committed to involving young people in having an active role in local arrangements. BSCP works closely with youth networks, whose activity this year has focussed on transitions into adulthood, mental health and wellbeing.

Our Partners

- Barnardo's
- Barnsley College
- Barnsley Council
- Barnsley Hospital NHS Foundation Trust
- Barnsley Safeguarding Adults Board
- Berneslai Homes
- Cafcass
- Compass
- Healthwatch Barnsley
- Humankind
- IDAS
- National Probation Service
- NHS Barnsley Clinical Commissioning Group
- NHS England
- Safer Barnsley Partnership
- South West Yorkshire NHS Foundation Trust Partnership
- South Yorkshire Fire and Rescue
- South Yorkshire Police
- Spectrum Community Health CIC
- Stronger Communities Partnership

The Impact of Covid-19

The impact of COVID-19, as with the rest of the country, was devastating. Barnsley's death rate was one of the worst in the country with 454.3 per

100,000 residents. The United Kingdom Health Security Agency (UKHSA) Barnsley Child Health Profile 2021 suggests that the rate of self-harm (10 to 24 years) in Barnsley stood at 807.4 per 100,000, significantly higher than regional and national rates. There is long lasting impact on employment, mental health and substance misuse affecting families' economic circumstances, exacerbated by increased cost of living crisis and fuel poverty.

Practitioners faced enormous challenges in terms of service delivery and their own exhaustion. Safeguarding for both adults and children remained an absolute priority for all partner agencies. Many appointments had to move to a virtual format but all essential functions were maintained. Visiting all vulnerable children to ensure their welfare was prioritised. Social workers led the safeguarding effort throughout the pandemic at great risk to themselves in the early days. 0-19 nurses and schoolteachers knocked on doors and visiting plans were devised to ensure frequent and persistent contact with children.

Services have adapted as COVID broke down barriers, including swifter information sharing and hybrid working. It has left a legacy of challenges as the impact of the pandemic continues. In such a shifting environment, the Children's Safeguarding Partnership is evolving.

New Strategic Priorities For 2022-25

Based on what our data tells us, the outcomes of Child Practice Reviews and conversations with partnering agencies, children, young people and

their families, the partnership has identified its four strategic priorities for 2022–25.

Child neglect - improving outcomes for children and young people at risk of neglect and harm

- In Barnsley, child neglect is a consistent and frequent concern for referrals to the multi-agency safeguarding hub.
- Recent reviews include themes of child neglect and parental mental health.
- Child neglect is a major adverse childhood experience in young lives.
- The impact of the pandemic has masked an increase in child neglect, which is coming into view post-lockdown.

Child exploitation - improving outcomes for children and young people at risk of exploitation and harm outside of home

- Significant increase in child exploitation in national and regional reports in the past year.
- The impact of the pandemic has masked an increase in child exploitation which is coming into view post-lockdown.
- Increase in local numbers of children and young people with missing episodes and school absence. We recognise the link between missing episodes, absence and the risk of exploitation and harm outside of home.
- We recognise that child exploitation is part of the wider contextual safeguarding agenda.

Bullying, online harm, stalking and harassment

- Barnsley young people and schools tell us that bullying and online harm are consistently high areas of activity and concern.
- An increase in online harm, coming to into view post-lockdown, evidenced in national reports (NSPCC, Internet Watch Foundation).
- The impact of social media is that children and young people now experience bullying through online harm in their places of safety.

Service development and improvement

- We're a learning organisation. We value and support a continuous learning and improvement culture in the partnership.

- We learn from national and local Child Safeguarding Practice Reviews, and will maximise learning opportunities from other serious incidents.
- Scrutiny of relevant performance data and business intelligence supports a continuous learning and improvement culture.
- The role of Independent Scrutineer brings appropriate quality assurance.
- Procedures will be in place for data collection, audit and information sharing, as part of the six steps for independent scrutiny (Uni of Bedford SCP arrangements).

The Barnsley Safeguarding Landscape

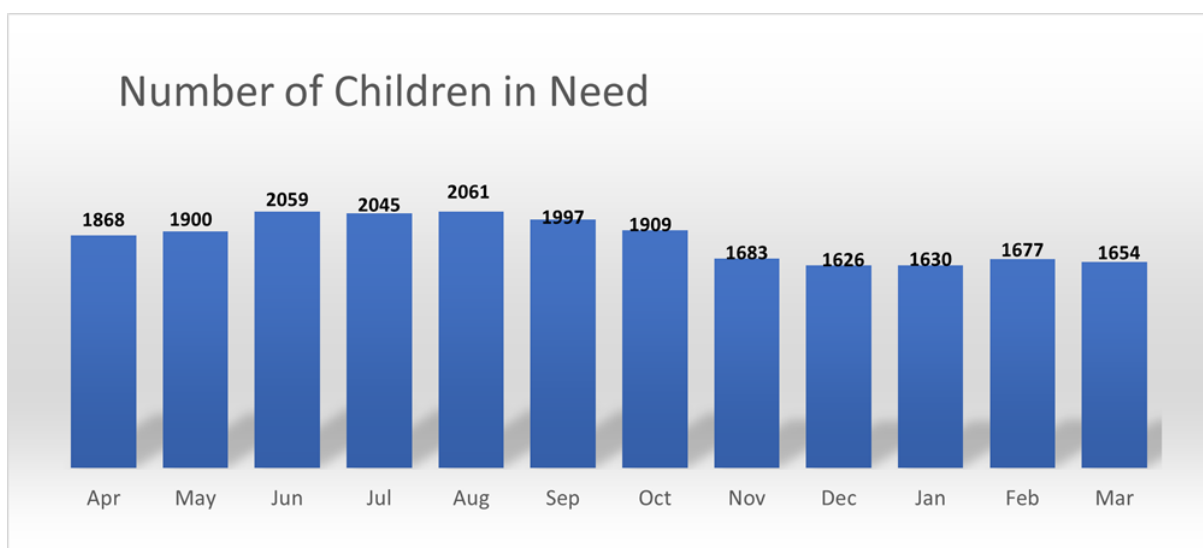
Safeguarding referrals

The Barnsley borough profile 2019 has approximately 52,000 young people aged 0-18 years living in Barnsley. In 2021–22 there were 2815 referrals received into front door services - the multi-agency safeguarding hub (MASH). Referrals came from several sources with over 60% from the police (821), schools (480), families (256) and hospital (191).

Children on a child in need plan

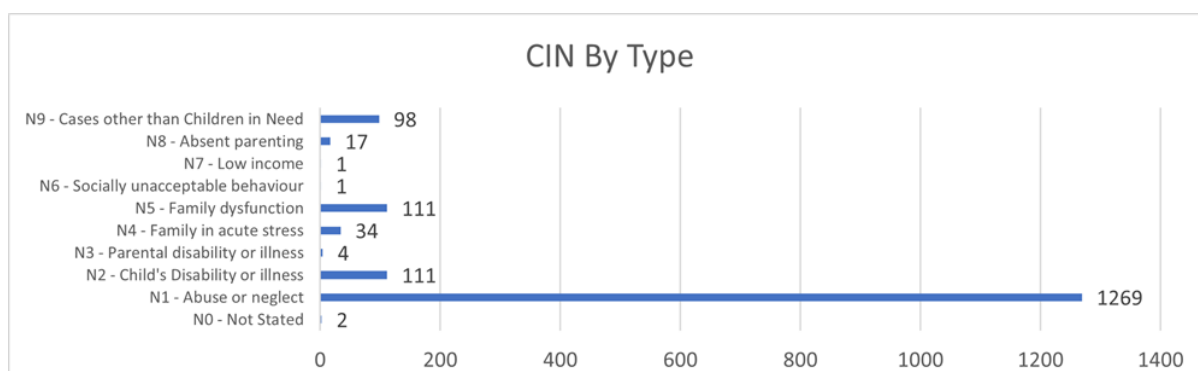
The numbers of children on a child in need plan has a 20% range where seasonal factors are at play and show a slight increase on last years' numbers.

Abuse or neglect was the reason for over 60% of child in need plans and is broad description type covering a range of concerns for children in need.



Month	Number of children in need
April	1868
May	1900
June	2059
July	2045
August	2061
September	1997
October	1909
November	1683
December	1626
January	1630
February	1677
March	1654

Children in need by type

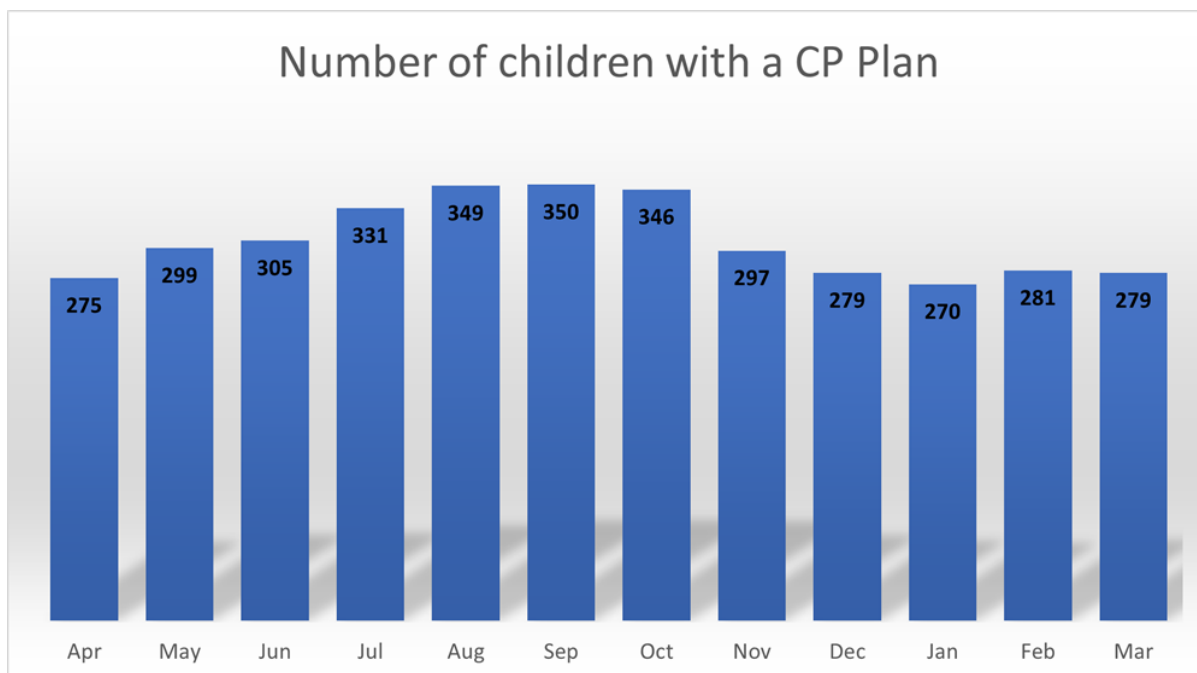


Type	Number of children in need
N0 - not stated	2
N1 - abuse or neglect	1269
N2 - child's disability or illness	111
N3 - parental disability or illness	4
N4 - family in acute stress	34
N5 - family dysfunction	111
N6 - socially unacceptable behaviour	1
N7 - low income	1
N8 - absent parenting	17
N9 - cases other than children in need	98

Children on a child protection plan

During 2021/2022 children subject to a child protection plan has fluctuated between 275 and 350. Overall it represents a slight decrease compared to the previous 12 months and is an area of work that receives a high level of

scrutiny to ensure the right help is given to children at the right time for their needs.



Month	Number of children with a child protection plan
April	275
May	299
June	305
July	331
August	349
September	350
October	346
November	297
December	279
January	270
February	281
March	279

Children on a plan by type

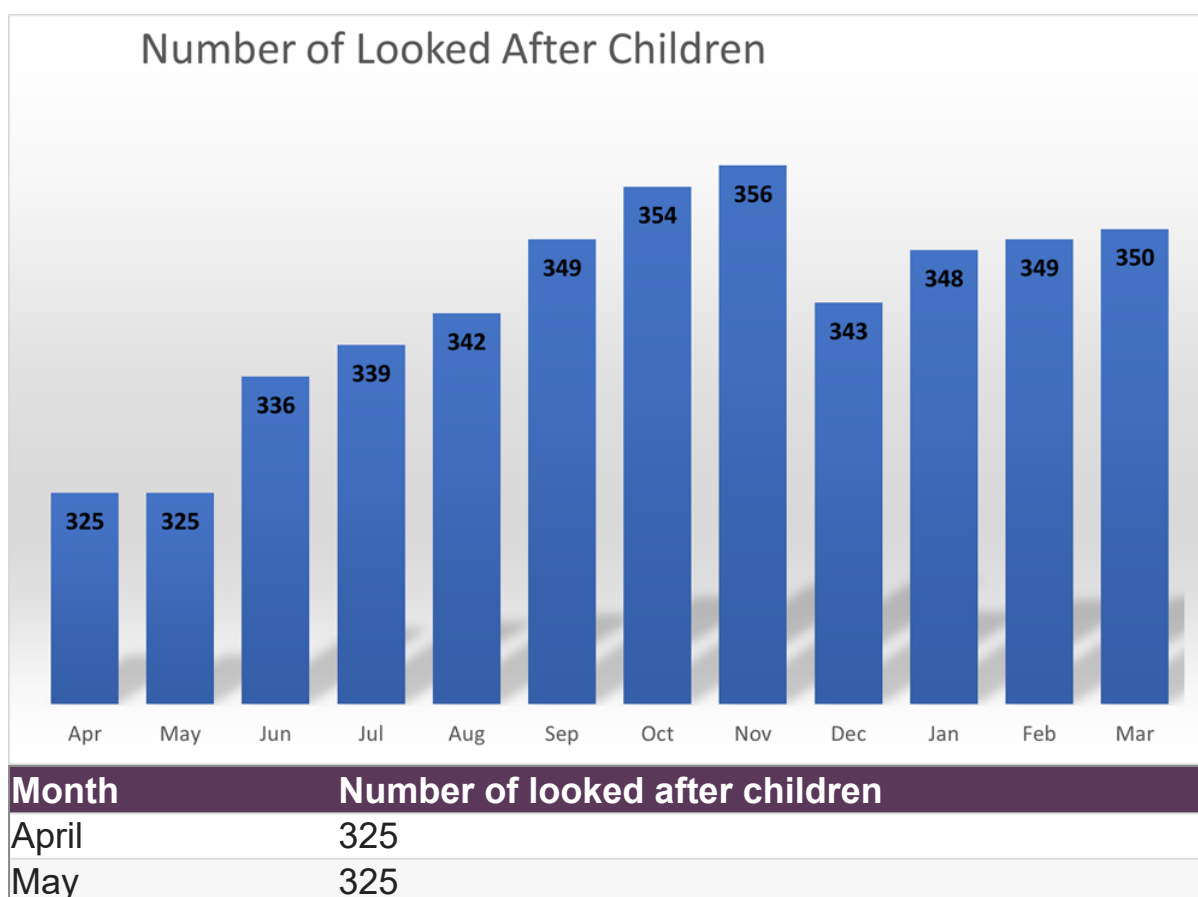
The largest category, emotional abuse or psychological abuse, involves the continual emotional mistreatment of a child. It can include humiliation and constant criticism, persistently ignoring them and failing to promote a child’s social development. It includes exposing a child to upsetting incidents such as domestic abuse and substance misuse. The 'multiple' category is being revised so we are clear about the lead category of abuse in future.

Latest category	Count at 31 March 2022
Emotional	105
Multiple	69
Neglect	77
Physical	9
Sexual	19
Total	279

Children in care

The rate of looked after children (LAC) in Barnsley at the end of 2021/22 was marginally higher at the end of 2020/21 (3%). The rate of looked after children in Barnsley is well below our statistical neighbours' average and broadly in line with the national average for 2020/21. This provides us with confidence that our approach to accommodating children is proportionate and balanced.

In 2021/22 our rate of children leaving care due to a permanence order is strong (59%), 20% of whom were adopted. It is recognised that a detailed report for children in care and care leavers should be included here in and will be addressed next years' annual report.



Month	Number of looked after children
June	336
July	339
August	342
September	349
October	354
November	356
December	343
January	348
February	349
March	350

Child exploitation

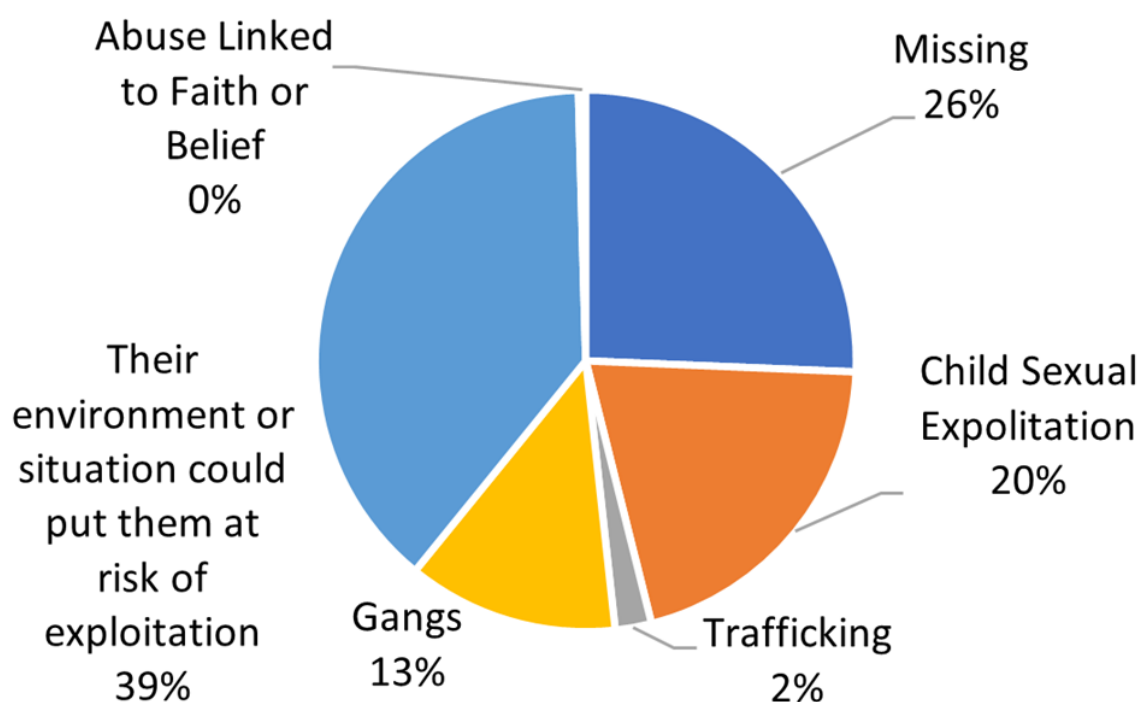
Child protection (S47) assessments where child exploitation was a risk factor

167 children and young people had authorised assessments with risk factors that relate to child exploitation. The most prevalent factors identified were:

- their environment or situation could put them at risk of exploitation (53.3%)
- missing episodes (35.3%)
- child sexual exploitation (28.1%)

Based on these findings the contextual safeguarding team will complete neighbourhood mapping exercises to identify areas where children and young people are most at risk of types of child exploitation to prioritise future work.

Risk Factors Identified on Assessments



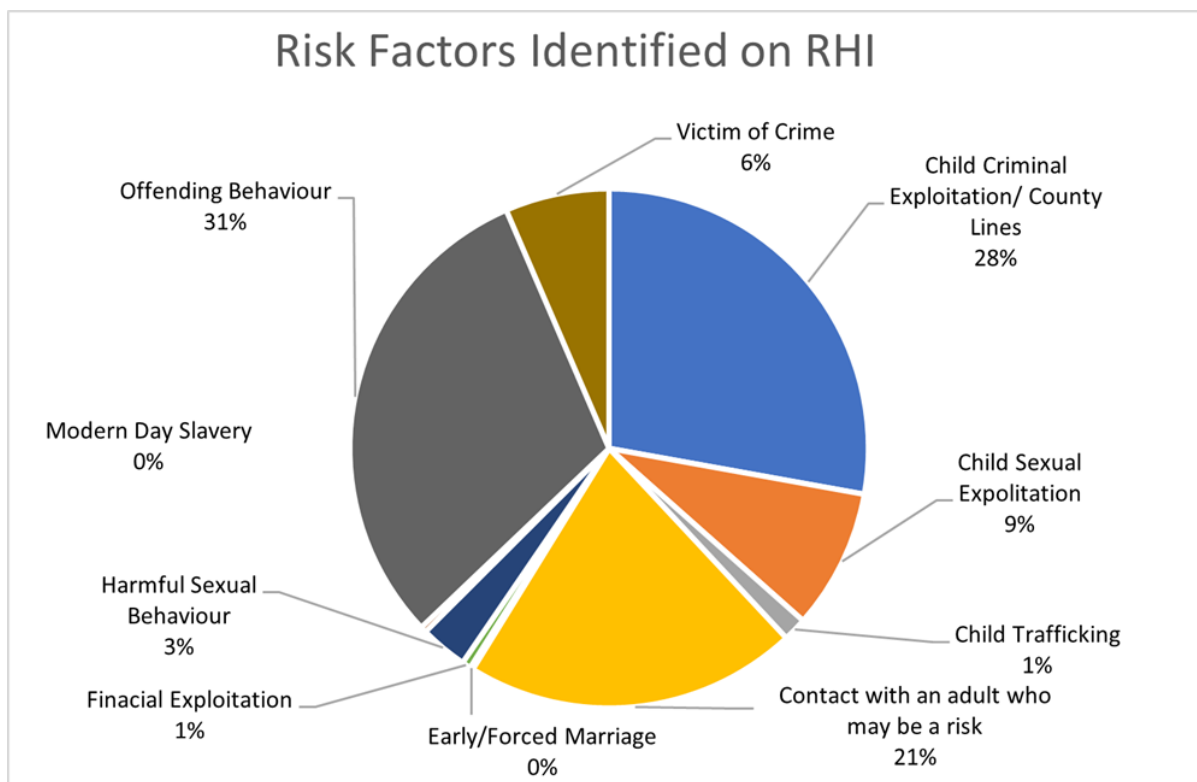
Risk factor	Percentage identified on assessment
Missing	26%
Child sexual exploitation	20%
Trafficking	2%
Gangs	13%
Their environment or situation could put them at risk of exploitation	39%
Abuse linked to faith or belief	0%

Child exploitation risks and return home interviews

These results capture the risks of exploitation for children and young people that go missing from home. They're based on the findings of the return home interview team for 115 young people supported in the 12 month period.

Child exploitation, offending behaviour and contact with adults who present a risk to them cover 80% of results. There can be several factors in play

with one individual, emphasising the multiple risks associated with contextual safeguarding.



Risk factor	Percentage identified on return home interview
Child criminal exploitation/county lines	28%
Child sexual exploitation	9%
Child trafficking	1%
Contact with an adult who may be a risk	21%
Early/forced marriage	0%
Financial exploitation	1%
Harmful sexual behaviour	3%
Modern day slavery	0%
Offending behaviour	31%
Victim of crime	6%

Priorities (2021/22)

Last year the partnership set seven strategic priorities. Here is a summary of what we did.

1. Reducing the numbers of children harmed by overlay

In 2020 Barnsley families suffered five infant deaths due to overlay, a higher rate than statistical neighbours where the rate is three. One of our main priorities was to prevent and reduce the numbers of overlay deaths. Barnsley is a local authority with strong community and family support. Health partners led on this priority. It included development of the multi-agency safe sleep guidelines, tool kit, training and a public health awareness campaign that has included social media, TV and radio campaigns, to inform and educate intergenerational family support. A multiagency approach across social care, hospital's mental health, police, housing, fire and rescue means that all agencies offer the same advice and assessments and recruit safe sleep champions who promote awareness and share best practice in their teams.

Safe sleep is promoted in pre-birth assessments. Multi-agency pregnancy liaison meetings support early identification of those where there is increased risk due to known factors such as alcohol or substance misuse or domestic abuse. There is a co-ordinated and agreed plan between agencies following babies' births and hospital discharge.

South Yorkshire police officers and frontline staff are adding unsafe sleeping conditions to their referral checks. Increased public awareness of safe sleep messages means that families have greater knowledge and confidence of safe sleeping arrangements. From 2021 to date there have been no infant deaths through overlay and whilst an absolute correlation cannot be drawn, impact measures and outcomes have been very positive.

2. Applying learning from local and national Child Practice Reviews (CPRs) to practice

Learning from Child Practice Reviews starts with the Local Child Safeguarding Practice Review subgroup and is taken through the Policy and Learning subgroup for training and development. The BSCP publishes newsletters and 7-minute briefings. Single agency routes include the Social Work Forum and Trust Lite lunchtime sessions. It also informs our social media messaging and website. Assurance that learning impacts practice change is tested through supervision, multiagency audits, results and what children and families tell us.

Learning from local CPRs in 2021-22 inspired BSCP's prioritisation of safe sleep and ICON (coping with crying babies) campaigns. The refreshed 'injuries to non-mobile babies protocol' is now in place across the BSCP and will be tested through a second audit in autumn 2022. Increased referrals by BHNFT evidences the impact of training delivery which saw an average monthly increase in referrals from 30 in 2020-21 to 70 in 2021-22, following the launch of the training strategy.

Two Child Practice Reviews, [Child X](#) and [Child W](#), were completed in 2021 following the tragic deaths of two babies. The group also compared our practice against the recommendations of the National Safeguarding Panel's third thematic review, 'The Myth of Invisible Men' (September 2021). The review looks at the circumstances of babies under one-year-old who have been harmed or killed by their fathers or other males in a caring role. We contributed findings from two Barnsley Child Practice Reviews in 2018-20, to the review. Focus on learning and practice change was delivered through:

- Presentations across BSCP, the Best Start Partnership and the Children's Trust Executive Group, through single agency forums
- BSCP newsletters and social media messaging
- Training content informed by review themes, including 'Safeguarding Infants in the First Year of Life'.
- Themes of preparing for parenthood for young parents. Focus on both parents in ante and postnatal health checks, parental mental health and the impact of cannabis use are priorities in BSCP service development. Young parents have been invited to help shape future service planning in the 0-19 PHNS and mental health (South West Yorkshire Partnership Foundation Trust).
- Local safeguarding children partnerships across South Yorkshire will hold a joint 'Myth of Invisible Men' conference during Safeguarding Awareness Week in November 2022.

The BSCP executive will be more actively engaged in ensuring that the practice reviews it commissions fulfil the requirements set out in Working Together 2018 particularly and ensure that recommendations focus on improving outcomes for children. We also accept that we must better evidence the impact of changes made, as a result of the learning from what are often tragic events.

3. A multiagency focus on child neglect and poverty proofing, which recognises the impact of COVID-19 on Barnsley communities and effects of neglect on children. Promote the use of the graded care profile, a neglect assessment tool, by all colleagues.

Over 90% of police colleagues completed 'Every Child Matters' training to improve understanding and identification of safeguarding concerns of children and have also completed a service-tailored 'Graded Care Profile' training, which enables colleagues to recognise the signs of neglect and to understand the causes behind it. Operational teams are better equipped to respond to safeguarding concerns, suggested by an increase in referrals in Barnsley from the previous 12 months, from 1599 to 2346 (46%). After some initial concerns about proportionate response, the application of

learning was successfully tested in the recent JTAI audit of 15 child neglect cases in the use of emergency protection powers to assure that police responses were not overly interventionist.

Understanding of the impact of COVID-19 on mental health has been brought by mapping increased mental health incidents in children against pre-COVID levels. Barnsley hospitals have carried out audits during and following COVID, furthering on from reports of reduced resilience in children. Multi-agency contagion plans and risk assessments have helped ensure appropriate provision is in place. This activity has brought insights into the impact of COVID-19, to better support children with the right services, for example in multiagency health work with Compass (bereavement services).

Distribution of Aldi and Rose vouchers have continued to be delivered throughout 2021-22 to support families who are struggling financially so that access to food, fresh fruit and vegetables does not impact disproportionately on neglect assessments.

The results of an impact testing audit tell us we have more to do to ensure that the 'Graded Care Profile' is more consistently used across partner agencies.

4. Increase the take-up and effectiveness of early help and support to families, especially those experiencing poverty through social disadvantage as we recover from the pandemic.

The aim of early intervention is to reduce the numbers of children who experience adverse childhood experiences as a result of neglect and poverty. This has been supported through:

- Early help (EH) colleagues now being part of the multiagency safeguarding hub.
- Early help activity being reviewed through multiagency audits.
- Investment in a EH schools development officer to support schools to drive the uptake of early help assessments (EHAs).
- An Early Help Navigator employed at Barnsley Hospital. The team expanded to include two outreach workers.

Volumes of Early Help Assessments have increased and the number of requests for targeted EH support has doubled in the 12 month period. Schools have dedicated support and access to training, which received positive feedback from schools in this years' peer review and JTAI. Early help needs are identified by the Early Help Navigator when families and

children present at hospital. Needs are identified and appropriate support is put in place to enable children and families to achieve better outcomes.

5. Implement the recommendations and learning from the Ofsted May 2021 report into sexual abuse in schools and include an additional question in our S175 safeguarding audit in schools.

The Schools Alliance held schools cluster meetings to discuss the response. The Ofsted report was used to design a reflective audit tool, shared with all LA maintained schools and academies. Leaders welcomed this and used it to underpin their self-evaluation and action plans. Initial responses formed part of the LA risk assessment criteria in September 2021 and was discussed with school and trust leaders. As a result of the audit, school leaders reported several changes. These include peer on peer abuse as part of annual training, sharpening of recording processes, awareness work with parents to enable them to talk to children about worrying incidents that schools may not be aware of. Follow up risk assessment work is planned in September 2022, to test the outcomes of the implementation of Ofsted's recommendations. A smart survey asked schools about the impact of the Ofsted findings. Whilst there was a low participation rate of 25%, some reported that children felt school was a safer place and that it was easier to talk about incidents of peer-on-peer abuse.

The latest S175 self-assessment audit covered the period to July 2021, which was just three months into Ofsted recommendations and included a question about peer-on-peer sexual abuse. The S175 results have been shared with schools through the Designated Safeguarding Leads forum. The findings underline we have more to do to support schools, to improve areas of contextual safeguarding and in particular, safeguarding awareness and support around issues of harmful sexual behaviour in the year ahead.

6. Implement the revised Anti-Bullying Strategy and action plan with schools and partners to respond positively to the voice of young people to provide more safety and freedom from bullying and harassment in their daily lives.

The Anti-Bullying Strategy was finalised earlier this year and a meeting with the Youth Council and SEND Forum in February 2022 started to shape the action plan. The signed [commitment to tackling bullying and harassment of young people](#) was put in place last year. The next steps will be to co-develop the peer inspector's check and challenge initiative. Young inspectors will gather feedback directly from students about their experiences and the impact of the BSCP anti-bullying commitment in their schools.

This year's S175 safeguarding audit in schools evidenced that bullying continues to be a live issue. Anti-bullying was a lead item in BSCPs Safeguarding Awareness Week 2021 and many Barnsley schools and students took to social media to show how they were taking anti-bullying messages into schools with the 'One Kind Word' and 'Odd Socks Day' national campaigns led by the Anti-Bullying Alliance.

We have more to do to ensure we respond more actively across the partnership to the things that children and young people tell us about their experiences of bullying. Because young people told us that online abuse and bullying is important to them, BSCPs refreshed strategic priorities have bullying, harassment and online harms as one of the four main priorities with a dedicated work plan.

7. Strengthen our engagement with young people and their voice in development and co-production of safeguarding strategies and the work of the partnership.

BSCPs S11 audit reported in March 2022. Several partners gave examples of their work to strengthen engagement with young people and capture youth voices in co-production and shaping services. Examples include:

- Tenants First is Berneslai Homes' family support service. It's junior wardens scheme engages children and young people in local areas and works in partnership with schools.
- South Yorkshire Fire and Rescue's youth engagement practice group offers specialist courses to 16 – 25s at Barnsley College. A youth-focused approach is used with cadets and there is a new code of conduct for staff recruitment for those working with young people. A new Youth Engagement and Interventions role in 2022 will develop a youth panel for service and a youth participation group.
- South West Yorkshire Partnership NHS Foundation Trust (mental health services) involve young people in interview questions and recruitment panels. Joint working with Chilypep is underway in shaping youth mental health services. Care programme approaches (CPAs) are co-written, complaints and language are child-friendly.

We also have areas where we want to improve engagement. The local safeguarding children's practice review into Child W gave a very powerful example of a situation where a child's voice was not properly heard or given the weight it warranted. We know we must do better in our assessments and direct work to ensure we use the lived experiences of children and young people to drive improvement in terms of practice and strategic development.

Young people told us that we have more to do to improve the experience of transition to adult services and adulthood. We recognise that if we seek the views of children and young people, we have an obligation to respond to those views with positive action or to report back honestly to them why their ideas cannot be taken forward.

As part of the ongoing mental health campaign youth councillors along with fellow youth voice groups combined their joint working efforts to develop the Engagement and Mental Health Charter. 115 individuals in youth organisations and in the community collaborated to look at what youth voice is, the founding principles of youth engagement, core skills of effective co-production and what services offer young people in relation to mental health. The Engagement Charter is an excellent guide for services who want to engage effectively with young people. Read the [Young People's Engagement Charter](#).

Engaging Children and Young People's Voices

We take an inclusive approach to children and young people and try to give good opportunities for their voices to be heard. Before the pandemic, the partnership meeting was held once or twice a year in a school, so that afterwards young people had chance to talk to BSCP members about what life is like for them living in Barnsley.

Young people led the session on transitions into adulthood with a powerful presentation of their experiences at the annual joint BSCP and Trust Executive Group (TEG - Children's Trust) meeting in December 2021. All youth voice groups contributed their personal experiences of the different transitions young people encounter. Their presentation explained how transitions impact upon young people and how services can support the various transition processes. There were several positive experiences but not all and the message to the room was that when the right support is not given at the right time, there are long lasting impacts, affecting journeys into adult life. All stakeholders attending found the presentation to be insightful and have taken its' key messages into their agencies.

A youth panel participates in all partnership recruitment. Greenacre School hosted the Children with Disabilities subgroup in January 2022 and met students afterwards. There was a question and answer session ranging from help with transitions, using sensory rooms and access to dog parks. Barnsley has a very active youth voice network including the Youth Council, SEND Forum, Care4Us Council and Chilypep - the youth empowerment project which promotes young peoples' wellbeing and mental health. This year they led key activities during Safeguarding

Awareness Week 2021 including the safer places, safe spaces filmed walk in the town centre and launched several social media clips:

- zero tolerance to hate crime
- no to harassment on public transport
- experiences of leaving care

(A selection of young people's stories is available in the HTML version of the Annual Report)

Education

Designated Safeguarding Leads Forum

The Barnsley Schools Designated Safeguarding Lead (DSL) Forum is an informal, well-attended meeting of school DSL representatives held every term. The purpose of the forum is to support leads with information and skills to ensure effective safeguarding practice in schools and colleges. It's also a great information-sharing and contact network. It takes place after school to help maximise participation.

Recent key safeguarding topics include:

- how to raise concerns about a child
- private fostering arrangements
- Operation Encompass
- children missing in education
- early help assessments
- emotional health and wellbeing in schools
- recruitment of e-safety champions in schools
- contextual safeguarding

At the latest forum the Early Start and Families Strategy/Service Manager led a discussion on the early help assessments process to update DSLs of recent changes and to strengthen links between schools and BSCP services.

As well as guest presenters at the forum, there are regular agenda items. These include the multi-agency safeguarding children partnership training offer presented by the partnership trainer, the safeguarding children landscape presented by the Local Authority Designated Officer, and live escalations which covers cases of professional disagreements between practitioners and services led by the Strategic Safeguarding Partnership

Manager, who ensures that any concerns are dealt with effectively and expeditiously.

We have developed a new education section on the BSCP website with new guidance and resources to support safeguarding work in schools and colleges.

Going forward, an actions and impact tracker will monitor the process and ensure the satisfactory conclusion of actions generated at the forum.

The forum is also a valuable platform for services as it provides a direct link to schools and informs service improvement.

Here are some comments from the forum:

- "Thank you for all presenters input - always very helpful."
- "Thank you, great information this evening."
- "As a newbie, this has been enlightening and very useful. Thank you."

Barnsley Schools Alliance

Following the Ofsted review into sexual abuse in schools and colleges, the alliance met with school clusters to discuss implementation of its recommendations and assurance of steps taken to review policy and practice.

Ofsted recommendations provided the basis for a reflective audit tool, circulated to all LA maintained schools and academies. Leaders welcomed this and used it to underpin their self-evaluation and action plans. The initial response informed the LA risk assessment criteria in September 2021 and was discussed with schools, trust leaders and governors. As a result of the audit, school leaders report the following changes have been made:

- Review of safeguarding policy and practice.
- Annual staff training, and ongoing updates for staff include peer-on-peer abuse.
- Staff awareness has been raised to be alert to incidents which could suggest inappropriate sexualised behaviour.
- Leaders have tightened up recording and reporting procedures by including a specific tag code for concerns of a sexual nature to improve tracking and early intervention.
- Communication between parents and school has been strengthened, to encourage information-sharing between parents and school, about

worrying incidents that children may talk about at home but not school.

- When we receive complaints about schools from Ofsted, we look for indicators that staff may not have identified, helped, and managed incidents appropriately through the investigation process. We make recommendations and check leaders' follow-up actions. This contributes to the strengthening of school systems and procedures helping to ensure pupils are safe from harm.

The Barnsley Schools Alliance also brokered Development webinar sessions to raise awareness across the sector for school leaders, governors and DSLs.

In September 2022 we will review the number and nature of reported incidents, and school responses. The review will include the results of latest S175 self-assessment audit. Further support and training will be provided where required.

When we have safeguarding concerns about a school, we undertake an individual safeguarding review. The framework has been shared with LA maintained primary schools to support the peer review process. There is now a requirement in the risk assessment criteria to have safeguarding externally checked. Many schools haven booked an external safeguarding review and arranged to undertake peer reviews in their clusters. In addition, aspects of the safeguarding are tested through safer recruitment and disqualification checks. Further guidance was circulated to all leaders to remind them of their duties under the Childcare Act 2006. This action has further strengthened safeguarding practice in schools and the skills of leaders within the system to check each other's practice.

Elective home education

The Education Welfare service works in partnership with schools, families, and agencies to ensure that children who are not registered on a school roll are tracked through our children missing education (CME) or our elective home education (EHE) procedures. The purpose of our work is to safeguard pupils by ensuring they receive a suitable education in a safe environment.

The pandemic has seen a significant increase in children being electively home educated, both nationally and in Barnsley. Our partnership approach has a focus on safeguarding and work with families to understand their needs. The aim is that when parents choose EHE they do so in the best interests of their child. We support families to return to school-based education. Between March 21 and April 22, 83 pupils (approximately 18%)

left the EHE register to return to school-based learning. Those that remain EHE are contacted annually by the EHE advisor who provides advice and guidance on providing a suitable education.

Multi Agency Safeguarding Training Programme

Since the pandemic, training has been offered virtually and uptake of training has increased significantly. The Policy Procedures and Workforce Development subgroup has continued to evaluate training in this format and concluded that virtual training offers several benefits and promotes better attendance. Some training, however, benefits from being held in person and will return to classroom delivery in 2022-23.

Despite the continued significant difficulties of this year and the pressures on staff, high demand has continued and an extensive programme of virtual training events was offered and attended by a total of 2837 practitioners from across partner agencies. The BSCPs range of courses is above those offered by many local safeguarding children's boards and receives very positive feedback from learners and from the recent JTAI inspection.

In August 2021 a contextual safeguarding specialist trainer was employed to design and deliver a number of brand-new courses. These include:

- a 45 minute 'understanding contextual safeguarding' e-learning course, which has had over 100 uptakes
- a webinar on contextual safeguarding, available on the BSCP website
- three new multi-agency online 'lite bites' seminars:
 - Awareness raising of contextual safeguarding
 - Young people and online harms
 - Child sexual exploitation

The courses are popular with full bookings and a waiting list. Feedback is very positive and to date 168 professionals have participated in the new online courses, with bookings confirmed for a further 266. We have confirmed training for the Brook traffic light tool which will equip four practitioner trainers to deliver child exploitation and harmful sexual behaviour risk assessment training to 400 later this year.

We know we have more to do to be able to evidence the impact of training and learning in terms of how it translates into frontline practice and ultimately improves the experiences of children and families. Delivering training is just the first part of a process and we recognise that similar themes arise from reviews where outcomes have been poor, to be complacent in this regard.

Despite pressures of home working, staff absence due to COVID-19 and additional demand placed on services, attendance at training has been prioritised by agencies and practitioners and is an excellent example of commitment to safeguarding children, partnership working and learning together. [See our full training programme.](#)

Section 11 and Section 175 Self-assessment Audits

- **Section 11 self-assessments**
Partnerships have a legal duty to prepare a self-assessment audit for agencies to assure themselves and the partnership that standards to safeguard and promote the welfare of children and young people are met and is part of the duty to 'assess whether LSCP partners are fulfilling their statutory obligations' (*chapter 2, Working Together 2018*).
- **Section 175 self-assessments**
These reflect the same partnership duty in relation to schools and colleges, governed by the Education Act 2002. It assures schools and the partnership there is a good standard of compliance; a safeguarding culture and are alert to emerging themes.

The S11 self-assessment audit 2021-22 was the first in three years and gave agencies the opportunity to review the effectiveness of their safeguarding arrangements. Read the full [S11 self-assessment audit 2021 report](#).

Ten agencies took part, across Children's Services, health, police, housing, fire and rescue, probation and education support services. The results of the audit told us:

- Agencies worked well together to adapt to the challenges of the COVID pandemic, to ensure that work with children and families continued through lockdowns.
- Compliance with safeguarding responsibilities was of a good standard across agencies.
- Training is well established and the multiagency training programme offered by BSCP is valued for its content, range and effectiveness.

- A safeguarding culture was evidenced across all participating agencies along with a shared drive for continuous improvement.

Areas for development include:

- Increase the capture of the voices of children and young people, increase capture of impact and outcomes in partnership activities and interventions and how life improved for families as a result.
- Build upon the successful initiatives for safe sleep and coping with crying babies.
- Greater visibility of impact of safeguarding activities outside of home (contextual safeguarding).
- Ensure that all agencies are aware of and implement private fostering processes.
- Increase use of escalations policy for resolving professional disagreements.

Agencies will provide brief assurances in 2022 to measure their progress.

Early Help

Early Start and Families Service provides targeted early help intervention and prevention and gives an overview of current activity in relation to early help assessments across the borough in respect of the children and young people's workforce. We support and contribute to the Early Help Steering Group and associated Early Help Delivery Plan.

The past year has seen an increase in the numbers of children receiving early help support, evidenced by a rise in assessments completed. This is in line with BSCPs priority of increasing the availability and take up of early help by families so that fewer problems are escalated to a level of risk that requires statutory intervention. Enabling families to be stronger and more resilient to support their children.

We are working with our partners in children and adolescents mental health service and Compass bereavement service to understand the prevalence of emotional health and wellbeing and mental health needs as reason for support and to better align our services. Work with colleagues in the youth justice service is in hand to strengthen a joined up early help approach for children and their families in the youth justice service.

Safeguarding Awareness Week – November 2021

Safeguarding Awareness Week (SAW) is a shared event across South Yorkshire safeguarding children's partnerships and adults boards. Family

centres, schools and colleges joined Safeguarding Awareness Week 2021, raising awareness, sharing skills and taking key safeguarding messages to families and local communities. The launch event at Northern College had themes of neglect, transitions and exploitation. Positive anti-bullying themes of 'One Kind Word' and 'Odd Socks Day' celebrations were taken up in several schools including Queen's Road and Every Child Matters Academies, Kirk Balk, Shawlands, Milefield and Jump primaries, Springwell Special School and Springwell Alternative Academy.

Barnsley Youth Council and SEND Youth Forum ran three successful social media campaigns on safeguarding themes of zero tolerance of hate crime, with focus on racism and sexual abuse on public transport; Safer Places, which linked with the safe walk on 15 November where the Youth Council live-streamed their walk to show safer places available to young people in the town centre; and thirdly, hidden disabilities.

Some 434 participants from local communities and services took part in a week long BSCP training programme. We launched BSCP's Twitter account at the start of SAW21 which attracted a 5.3k reach during the week. The partnership's Twitter campaign promoted our safeguarding priorities of safe sleep, ICON's coping with crying babies campaign, private fostering, and neglect. These messages were shared in leaflets, publicity and training.

Family centres, schools and colleges joined Safeguarding Awareness Week 2021, raising awareness, sharing guidance and skills and taking key safeguarding messages to families and local communities. A wealth of [online resources](#) were promoted.

Barnsley Safeguarding Children's Partnership: Sub-groups

Child Death Overview Panel (CDOP)

Helps the partnership to develop a better understanding of how and why children die and informs prevention work. It is CDOP's role to look at all deaths of children and young people in Barnsley, whatever the reason, to see if there is anything we can learn from them and anything that might help us avoid such deaths happening in the future.

Activities, deliverables and what worked well

- Additional CDOP meetings were set up to address the backlog of cases (January 2022) and support complex case work.
- 'Panel debrief gives scope for reflection and support.

- A new learning and development item helps identify areas for improvement.
- A Healthwatch Barnsley representative has joined and makes valuable contributions to the panel.
- Training to schools to provide support for eating disorders and self-harm.
- Update of the Barnsley suicide contagion plan.
- A complex care team at Barnsley maternity services.
- Additional equipment for the neonatal unit.
- Best practice learning from Birmingham Hospitals to support improvements at Barnsley Hospital maternity service.

We will improve by

- Ensuring robust information gathering about the pregnancy, following a neonatal death. This will provide CDOP with the 'bigger picture' and enable identification of wider modifiable factors.
- Restructuring future meetings to ensure richness of data and more in-depth discussion.

Children with Disabilities (CwD) and Complex Health Needs subgroup

Its role is to ensure we work together to support the needs of vulnerable children and young people. Collaboration with the adult safeguarding board ensures effective arrangements are in place for these young peoples' transition into adulthood.

Activities, deliverables and what worked well

- We built on previous work to include the voice of children and young people, access to early help and support to parents and carers.
- We continued work with young people to tackle bullying, loneliness and exclusions.
- Developing a transitions to adulthood handbook for young people and their families to help them to navigate their journeys to adulthood.
- Support to families to enable them to be involved and plan for transition at an early point.
- Quarterly audits to assure the partnership that children with disabilities and/or complex health needs are assessed appropriately to receive the right support at the right time to keep them safe.

Next steps

- It became clear during 2021–22 that the issues being developed and addressed in this group were also discussed in other forums across the partnership (for example, the SEND Board and Early Help Steering Group). After a review and discussion it was felt that the CwD subgroup could be retired with the specific work streams being continued in other subgroups and with better links to the SEND board and young peoples' SEND forum.
- To assure that the voice of children with complex needs and disabilities is not lost, it is now a required item in all subgroups. The SEND Board has recently allocated representatives to all subgroups.

Policy, Procedures and Workforce Practice and Development (PPWPD) subgroup

Oversees and manages all aspects of our multi-agency safeguarding children training. It ensures that all multiagency training creates an ethos of collaborative working, respects diversity, upholds equality, is child centred and promotes participation of children and families in safeguarding processes. It considers learning from national and local emerging themes. The overall aim is to support the children's workforce to effectively safeguard children and to have a positive impact on their wellbeing.

Activities, deliverables and what worked well

- Monitoring of evaluations and attendances shows the value of courses and provides quality assurance.
- As a result of the above there have been very few course cancellations.
- Rolling review of policies and procedures to ensure they are relevant and current and promoted to colleagues.
- Tracking of escalations and single and multiagency audits help to identify impact on practice and any gaps.
- Developed new procedures or radically refreshed existing ones: bruising in non-mobile babies, safe sleep guidance and supervision.
- Two surveys have been sent to practitioners several months after attending training that aimed to assess impact. Both had positive results. Delivered a highly regarded multiagency training programme led by our excellent multiagency trainer and supported by partner agencies.

We will improve by

- The addition of youth mental health first aid training which will be co-produced with young people through Chilypep.

- Continuing to find effective ways to measure the impact of our training offer and delivery on practice and on keeping children safe.

Child Exploitation (CE) Strategic subgroup

The purpose of the Child Exploitation Strategic subgroup is to improve the partnership response to child sexual exploitation (CSE) and child criminal exploitation (CCE) including county lines. We recognise that children can be at risk from a number of other contextual factors from outside the home – many of which can increase the risk of exploitation. Children with access or exposure to weapons, who are 'looked after' by the local authority, who go missing, who have older friends, who have substance misuse and mental health issues, or are outside mainstream education are all potentially at increased risk.

Activities, deliverables and what worked well

- We have strengthened local processes for identifying, assessing, and protecting children and young people at risk of child sexual exploitation and criminal exploitation, to improve the response when referrals are received, to ensure that children and families get the right help and support quickly.
- A daily briefing of multi-agency partners with front door services improves real time information gathering and information sharing in relation to young people at risk of contextual safeguarding and incidents, including missing episodes overnight to provide a quick and timely response to safeguard young people more effectively from harm.
- The processes for return home interviews for children who go missing from home or care have been strengthened to ensure a timelier response. Auditing has evidenced improvements both in timeliness and quality of work undertaken to interview young people and to understand and prevent further missing episodes
- Training has been undertaken with foster carers, residential homes, and private providers for the South Yorkshire missing protocol and the Philomena project to better protect young people at risk of harm through missing episodes.
- Impact of the contextual safeguarding specialist trainer in Children's Services in extending knowledge and skills of practitioners has been positive.
- Case mapping – social care work closely with police to map organised crime groups, contextual safeguarding concerns and young people linked to certain areas.
- Made submission to Commission on Young Lives national call for evidence for young people at risk of exploitation and exclusion.

We will improve by

- Reaffirming our commitment to tackling all forms of exploitation of children, both sexual and criminal, with tackling CSE, CCE and county lines remaining as a shared strategic priorities for delivery through the CE Strategy group.
- Continue to conduct regular audits of cases where children and young people have been exposed to or at risk of CE.
- We will continue to ensure that those children stepped down to early help have effective plans in place to support that transition.
- We will also continue to build upon current relationships with education to support effective safety planning for children.
- Seeking a growth in staff amongst partners to better support our response to children at risk.
- The partnership is working towards using partnership data to understand what cohorts of children are most at risk in our community and targeting bespoke responses to them.
- Many concerns are addressed through broader pieces of work under other sub-groups or through the Community Safety Partnership. As a board, we need to work towards creating stronger links with those workstreams and ensuring that they specifically consider those concerns and the relevance to risks of exploitation.

Local Child Safeguarding Practice Review (LCSPR) subgroup

Its purpose is drawn from the requirements of Working Together (2018) to carry out arrangements for rapid and Child Practice Reviews in order to identify learning from themes in local and national findings.

Activities, deliverables and what worked well

- Between April 2021–March 2022 the LCSPR subgroup notified the National Panel of two local Child Practice Reviews, [Child X](#) and [Child W](#). Both cases of Child X and Child W were concerned with the deaths of babies under a year old. Alcohol and substance abuse were factors and domestic abuse was a feature in one case. Both reviews have been published and are available on the BSCP and NSPCC websites.
- The group considered the findings of the National Panel's third thematic review, The Myth of Invisible Men (September 2021) and have established where we meet its key recommendations and where there are gaps.
- Presentations across BSCP, the Best Start Partnership and the Children's Trust Executive Group; through single agency forums, all with a focus on practice change.

- South Yorkshire local safeguarding children partnerships will hold a joint Myth of Invisible Men Conference during Safeguarding Awareness Week in November 2022.

We will improve by

- We recognise that the review recommendations need to be improved and there needs to be sharper way of ensuring that those recommendations turn into actions that have a measurable impact on improving practice.

Performance Audit and Quality Assurance subgroup

The subgroup's focus is assurance and performance across the partnership, evaluating headline performance indicators across agencies. We quality assure practice through single and multiagency audits and share findings to improve practice across the partnership.

Activities, deliverables and what worked well

- Carried out five audits based on emerging safeguarding trends out of the COVID-19 pandemic/concerns based on local and national reviews.
- Themes covered were elective home education, timely sharing of birth plans between agencies, child neglect and use of the Graded Care Profile (an assessment tool used by practitioners to identify levels of risk in child neglect), appropriate referrals to Barnsley Sexual Abuse and Rape Crisis Service for children who experience sexual abuse at home and arising from the tragic deaths of Star Hobson and Arthur Labinjo-Hughes, a question of how well we respond to calls from families and anonymous sources, of concerns about abuse of children.
- The audits gave assurance of things we do well together and where we hear what children and young people tell us and areas where improvement is needed.

We will improve by

- Changes to risk in the lives of children and families in a post-pandemic lockdown world.
- Communications and information-sharing between agencies.

- Timeliness of interventions and appropriate step up and step down between services.
- Life experiences of young people are heard and shape our future priorities.

This group will change in the new partnership structure. The areas we want to improve in will go forward into the new structure and priorities.

Accounts

Safeguarding Children Partnership income and expenditure statement as at 31 March 2022.

Income*

Income	Amount
NHS Barnsley CCG	£56,500
Police and Crime Commissioner	£19,441
National Probation Service	£1036
SY other LA	£2250
CAFCAS	£550
BMBC	£99,616
Total income	£179,393

Expenditure*

Expenditure	Amount
Employee pay costs	£74,454
Computers	£9142
General expenses	£7559
Professional fees/consultancy	£26,515
Business support	£22,373
Total expenditure	£140,042

Underspend due to vacancy (carry forward to 2022-23) - £39,351

* Training revenue activity not included. Accounted for separately by BMBC.

Summary

The year 2021–22 has brought many changes in terms of the economic and safeguarding environment as we emerge from the pandemic and its impact on Barnsley communities. There have been changes to all executive partners and the addition of a new Independent Scrutineer. The recent peer review and JTAI inspection have pushed us to new challenges and revitalised ideas. We have agreed our new key priorities as we look forward to 2022–23. We are ambitious for children and improving their lived experiences.

We would like to thank everyone in the partnership for their commitment and collaboration during the past year as we move ahead to safeguard children and young people and promote their welfare together.

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Equality Impact Assessment

Stage 1 Details of the proposal

Name of service Directorate	Children's Social Care and Safeguarding (Children's Services)
Name of officer responsible for EIA Name of senior sponsor	Head of Safeguarding and Quality Assurance (Children's Social Care and Safeguarding)
Description / purpose of proposal	Annual Report of the Barnsley Local Safeguarding Children Partnership (2021/2022)
Date EIA started	19 th July 2022
Assessment Review date	30 th June 2023

Stage 2 - About the proposal

What is being proposed?	The latest annual report of the Barnsley Local Safeguarding Children Partnership (LSCP) has been compiled for Cabinet's consideration.
Why is the proposal required?	Submission of the annual report forms part of the role and responsibilities of the local statutory partners
What will this proposal mean for customers?	The LSCP's annual report provides a retrospective on how the Partnership has complied with its statutory responsibilities for safeguarding all children and young people from all forms of harm and promoting their welfare. The annual report proceeds to outline how the LSCP will continue to comply with its role

and responsibilities during 2022/23 in accordance with its local, strategic priorities. These have been informed through the engagement and participation of young people in the priority-setting process

Stage 3 - Preliminary screening process

Use the Preliminary screening questions to decide whether a full EIA is required

Yes - EIA required (go to next section)
 No – EIA not required (provide rationale below including name of E&I Officer consulted with)

Stage 4 - Scoping exercise - What do we know?

Data: Generic demographics

What generic data do you know?

The LSCP works in collaboration with a range of partners to identify and ensure the protection of all children and young people at risk of harm, including those with a protected characteristic. These partners include the Children’s Social Care Service, South Yorkshire Police, designated safeguarding leads in all schools and further education institutes.

Among the data used to identify and instigate any action is the number of referrals to Children’s Social Care including those which lead to an assessment; the number of children in need of help and protection including those with a child in need and child protection plan as well as data sets concerning the *Signs of Safety* and *Toxic Trio*. Also used is the outcome of single-agency and multi-agency audits of practice as part of improving overall provision.

Data: Service data / feedback

What equalities knowledge do you already know about the service/location/policy/contract?

Please see above

Data: Previous / similar EIA’s

Has there already been an EIA on all or part of this before, or something related? If so, what were the main issues and actions it identified?

This is the first EIA to have been undertaken alongside the compilation of the LSCP’s annual report.

Data: Formal consultation

What information has been gathered from formal consultation?

Information and data gathered for the purpose of the annual report include the perception of young people and families on what should be the priorities and objectives of safeguarding activity in the Borough. These are gathered not only through consultation initiated by the LSCP itself but also via the Barnsley Children and Young People’s Trust Executive Group

Stage 5 - Potential impact on different groups

Considering the evidence above, state the likely impact the proposal will have on people with different protected characteristics
 (state if negative impact is substantial and highlight with **red text**)
 Negative (and potentially positive) impacts identified will need to form part of your action plan.

Protected characteristic	Negative ' - '	Positive ' + '	No impact	Don't know	Details
Sex			√		A key objective of the LSCP’s work will be to continue to help tackle and eradicate all types of aggravated bullying and harassment and young people in the Borough
Age			√		None anticipated
Disabled <i>Learning disability, Physical disability, Sensory Impairment, Deaf People ,invisible illness, Mental Health etc</i>			√		A key objective of the LSCP’s work will be to continue to help tackle and eradicate all types of aggravated bullying and harassment and young people in the Borough
Race			√		Please see Rows 1 and 3
Religion & Belief			√		Please see Rows 1 and 3
Sexual orientation			√		Please see Rows 1 and 3
Gender Reassignment			√		Please see Rows 1 and 3

Marriage / civil partnership		N/A			None anticipated
Pregnancy / maternity		N/A			None anticipated

Other groups you may want to consider					
	Negative	Positive	No impact	Don't know	Details
Ex services			√		Targeted support and intervention will continue to be provided to children and young people in need of additional help as part of the Armed Forces Covenant
Lower socio-economic			√		Targeted support and intervention will continue to be provided to children and young people in need of additional help
Other ...					None anticipated-

Stage 6 - BMBC Minimum access standards

If the proposal relates to the delivery of a new service, please refer to the Customer minimum access standards self-assessment (found at)

If not, move to Stage 7.

Please use the action plan to be taken to ensure the new service complies with reasonable adjustments for disabled people.

Not yet live

The proposal will meet the minimum access standards.

The proposal will not meet the minimum access standards. –provide rationale below.

Stage 7 – Action plan

To improve your knowledge about the equality impact . . .

Actions could include: community engagement with affected groups, analysis of performance data, service equality monitoring, stakeholder focus group etc.

Action we will take:	Lead Officer	Completion date
Outcomes of child safeguarding practice reviews, together with Ofsted inspection activity and thematic reviews	Independent Chair of the LSCP	June 2023

Engaging with all groups of young people and their families particularly the Youth Council, Care4Us Council and SEND Youth Forum, together with other specific initiatives including the annual <i>Make Your Mark Survey</i> and National 'Takeover' Challenge	Independent Chair of the LSCP	June 2023

To improve or mitigate the equality impact . . .

Actions could include: altering the policy to protect affected group, limiting scope of proposed change, reviewing actual impact in future, phasing-in changes over period of time, monitor service provider performance indicators, etc.

Action we will take:	Lead Officer	Completion date
Pulse surveys and further consultation	Head of Education and Partnerships	June 2023
Identifying, disseminating and introducing best practice	Head of Education and Partnerships	June 2023
To ensure all schools implement coherent and consistent policies relating to safeguarding and that multi-agency training and development meets the needs of practitioners	Head of Education and Partnerships	June 2023

To meet the minimum access standards . . .(if relevant)

Actions could include: running focus group with disability forum, amend tender specification, amend business plan to request extra 'accessibility' funding, produce separate MAS action plan, etc.

Action we will take:	Completion date

Not yet live

Stage 8 – Assessment findings

Please summarise how different protected groups are likely to be affected

Summary of equality impact	The statutory role and responsibilities of the Barnsley LSCP mean that it must ensure the safeguarding of all children and young people at risk of
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harm, including those with a protected characteristic(s) and to promote their welfare. For example, as part of its ongoing responsibilities work will continue to tackle all forms of aggravated bullying and harassment, particularly in education settings, whilst work will also continue to protect young people at risk of harm caused by female genital mutilation, forced marriage and honour crimes.

Summary of next steps

The Annual Report reflects the commitment of statutory partners towards ensuring the continued protection of all children and young people from all forms of harm, through playing an important part in developments such as the Supported Families, Family Hubs and Start for Life Programmes; embedding the recommendations of the Independent Review of Children’s Social Care and in helping develop an inclusive and supportive local schools’ system, which promotes good attendance and engagement with learning.

Signature (officer responsible for EIA) Date

**** EIA now complete ****

Stage 9 – Assessment Review

(This is the post implementation review of the EIA based on date in Stage 1 if applicable)

What information did you obtain and what does that tell us about equality of outcomes for different groups?

BARNSLEY METROPOLITAN BOROUGH COUNCIL

REPORT OF: EXECUTIVE DIRECTOR CHILDREN'S SERVICES

TITLE: BARNSLEY DRAFT CHILDREN IN CARE AND CARE LEAVERS STRATEGY (2022-25)

REPORT TO:	CABINET
Date of Meeting	17 AUGUST 2022
Cabinet Member Portfolio	Children's Services
Key Decision	Yes
Public or Private	Public

Purpose of report

To seek Cabinet's agreement to approve and adopt the Borough's proposed Children in Care and Care Leavers' Strategy

Council Plan priority

The Strategy will support the following priorities in the Council Plan:

Healthy Barnsley

- By ensuring children in care and care leavers maintain their health and wellbeing and thereby reduce inequalities in both health and income

Learning Barnsley

- Particularly through ensuring vulnerable and disadvantaged children and young people are supported to attain good education outcomes and to achieve their potential within sustainable local communities.

Recommendations

That Cabinet approves for adoption the Barnsley Children in Care and Care Leavers' Strategy as part of our continuing 'Pledge' to children in our care together with our Local 'Offer' to young people leaving care

1.0 INTRODUCTION

- 1.1 Cabinet will recall that on 16th June it considered the latest annual report of the Corporate Parenting Panel which outlined how, in accordance with the Council's statutory responsibilities, the Panel had taken steps to continue to improve the range of outcomes for children in need of care, together with young people leaving care, including recent developments to enhance our local 'Offer' for young people leaving care.

2.0 PROPOSAL

- 2.1 The impact of the Covid-19 Pandemic has perhaps been felt more acutely by the most vulnerable people in society who have the greatest needs. In Children's Services, the effect of restrictions such as social distancing has inevitably impacted upon service provision. Whilst in Barnsley, our statutory responsibilities to children in need of help, protection and care continued to be met in full, this could not be the case in other parts of the country.
- 2.2 The need for a relationship-based approach in the quality of practice and provision in children's social care has remained paramount and, as the final report of the Independent Review of Children's Social Care, together with other documentary evidence have made clear, the experiences of children in care and young people leaving care has, potentially, been harrowing nationally, particularly when schools and settings were closed; health assessments disrupted and contact with friends, family and social workers curtailed. .
- 2.3 For this reason, Children's Social Care and Safeguarding in Barnsley undertook an extensive review into the experiences of children in our care together with young people leaving care to determine if there was anything further the Council and its statutory partners could do to shield this vulnerable and disadvantaged cohort of young people, following their experiences during the Pandemic as well as their current experience of the cost of living.
- 2.4 Appended to this report is the draft Barnsley Children in Care and Care Leavers' Strategy (2022-25) which begins by outlining our strategic vision for this group of young people and how this will support our overall Vision for the Borough as *A Place of Possibilities* by 2030.
- 2.5 This strategic vision will be underpinned by the following principles for corporate parenting:
1. To act in the best interests, and promote the physical and mental health and well-being, of those children and young people
 2. To encourage those children and young people to express their views, wishes and feelings
 3. to take into account the views, wishes and feelings of those children and young people

4. To help those children and young people gain access to, and make the best use of, services provided by the local authority and its relevant partners
5. To promote high aspirations, and seek to secure the best outcomes, for those children and young people
6. For those children and young people to be safe, and for stability in their home lives, relationships and education or work

2.6 Our commitment will be to ensure that all children in care and care leavers in Barnsley should expect the following:

- To be looked after in a safe and caring home
- To respect, promote and support their individual identity
- To enable them to receive a good education which helps them achieve their aspirations.
- To help them maintain their health and wellbeing
- To help prepare them in making the transition to adulthood
- For the Council and its statutory partners to learn and build upon the voice and experience of children in care and care leavers.

2.7 The draft Strategy goes onto indicate the additional measures which will be undertaken to fulfil these principles and expectations. These include:

- Continuing to increase the number of Local Authority foster carers, investing in skills and capacity and, at the same time, continue to reduce the number of children and young people in need of care having to be placed in accommodation outside of the Borough.
- Continuing to increase the long-term stability of placements, including through the commissioning of a Local Authority, directly managed residential facility in the Borough
- Providing the capacity to support the mental or emotional health and wellbeing needs of children and young people in care, together with those leaving care
- To build upon the percentage of care leavers aged 19-21 who are engaged in education, employment and training.
- To enhance our Local 'Offer' to young people leaving care through development of the care leavers 'hub'
- To continue to ensure the voice and experiences of children in care and care leavers inform the quality of practice and provision particularly through the office of the Young Mayor of Barnsley; Youth Council and the Care4Us Council

3.0 IMPLICATIONS OF THE DECISION

3.1 Financial and Risk

- 3.2 Consultations have taken place with representatives of the Service Director of Finance (S151 Officer). The financial implications and risks of the proposed Children in Care and Care Leavers' Strategy are summarised below.
- 3.3 The scope of the Strategy mainly covers budgets / spend on children in care (i.e. mainly looked after children placements) and provision for care leavers. It should be noted that the proposed strategy has been developed within the context of increasing number of children in care and rising cost of care support / provision to this vulnerable cohort.
- 3.4 In 2021/22, a financial cost pressure of £4.0M was reported for Children Social Care, of which £3.2M was against the children in care budget, mainly attributed to increased numbers and cost of external residential (£2.6M) and fostering care (£0.4M) placements than anticipated. Barnsley's LAC population number stood at 348 at year end compared to a planned number of 300 for the year.

Outlook for 2022/23 and beyond

- 3.5 The financial outlook for 2022/23 is challenging, in spite of additional investment in children social care of £4M to fund additional social workers (to address rising caseloads) and increased LAC placements numbers and cost (360 LAC number planned for the year). It should be noted that the recent influx and movements in LAC placements since end of March 2022 have resulted in increased cost pressures - estimated at £1M for 2022/23 (although it is anticipated that the measures put in place would reduce this pressure to £0.5M).
- 3.6 The Service continue to face challenges around the acquisition of a suitable property for the proposed council-owned children's residential home. Latest project timescales indicate that the new home would not be operational until June 2023. The slippage means a cost pressure of £0.2M in 22/23, with a reduced savings in 23/24 (£150k).
- 3.7 The following table detailed the planned LAC numbers for 22/23 and 23/24 and the resource requirement:

	2021/22	2022/23	2023/24
	Actual	Plan	Plan
Fostering – in-house	194	220	222
Fostering – External agencies	66	58	52
Residential - external provision	41	24	24
Residential – Owned home	5	10	10
Other placements*	42	48	42
Assumed CIC Population	348	360	350

Total Costs (£M)	17.966	18.482	17.987
Total Budget (£M)	14.949	17.981	17.987
Variance	3.017	0.490	0

3.8 Paragraph 2.7 summarises the Action Plan developed by the Service to manage the above cost pressures in 2022/23 and ensure that spend on looked after children placements is on budget over the medium term. Specifically it includes the following:

- increase our numbers of foster carers – there is a target to recruit 23 new carers in 2022/23 and are making excellent progress with 2 newly approved and 14 planned to fostering panel in the first half year;
- We want to reduce our use of IFA carers by 8 in 2022/23. We have seen a significant reduction from September to March but we want to see this trend continue with a further reduction of 8 as we increase our inhouse capacity;
- improvement in children experiencing stability in long term care and on the number of placement moves for children in care;
- There are 19 young people in external residential provision. We want to reduce the number of children and young people placed in external residential homes.
- Some of the above will be achieved by opening a new residential home.

3.9 The following highlight some of the financial risks with the above strategy and financial plan:

1. increasing number of placement breakdowns and moves during the year – which creates further pressure against budgets;
2. increase demand and children in care, including higher unit placement cost above assumed rates;
3. further slippage in the opening of the new children’s home;
4. slow down in the recruitment of in-house carers.

3.10 Legal

3.11 The draft Strategy has been formulated with due regard to the Council’s statutory responsibilities towards children in need of care and young people leaving care as part of ensuring continued full compliance.

3.12 Equality

3.13 An equality impact assessment has been formulated in support of the draft Strategy and is appended to this report

3.14 Sustainability

3.15 There are no implications for sustainability in the Borough, emerging through this report.

3.16 Employee

3.17 The draft Strategy expressly commits to continuing to increase the number, skills and capacity of Local Authority foster carers as part of creating additional stable and caring placements. This will help enable children to remain in their communities where safeguarding considerations permit and also prevent children from being accommodated in costlier residential provision, outside of the Borough.

3.18 Communications

3.19 Subject to Cabinet's approval, the principles and expectations inherent in the draft Strategy will be promoted in the dedicated part of the Council's Web site as part of our multi-agency approach to supporting the needs of children in care and care leavers.

4.0 CONSULTATION

4.1 The development of the draft Strategy has been informed by the voice and experiences of children in care and young people leaving care, together with the perspective of front-line social workers and practitioners.

5.0 ALTERNATIVE OPTIONS CONSIDERED

5.1 The draft Strategy demonstrates the Council's enduring commitment and passion towards improving the range of outcomes for this vulnerable group of children and young people, shielding them from adverse circumstances and promoting their resilience.

6.0 REASONS FOR RECOMMENDATIONS

6.1 Please see Paragraphs 2.1-2.7 and Paragraph 5.1 of this report. Subject to Cabinet's approval the draft Strategy will be underpinned by an action plan and risk log as part of maintaining progress against the principles and expectations outlined.

6.2 Progress will be reported to Cabinet, primarily through the quarterly corporate performance framework and to the Overview and Scrutiny Committee as part of the regular series of performance reports concerning children's social care.

6.3 In continually reviewing the effectiveness of the Strategy, developments, such as the outcomes and recommendations of the recently concluded Independent Review of Children's Social Care will inform the Strategy's development as part of our ambitions to commission and provide outstanding, evidence-based provision for children in care and care leavers.

7.0 GLOSSARY

7.1 None, applicable.

8.0 LIST OF APPENDICES

- 8.1 Appendix 1: Barnsley Children in Care and Care Leavers Strategy (2022-25)
Appendix 2: Barnsley Children in Care and Care Leavers Strategy (2022-25): Equality Impact Assessment

9.0 BACKGROUND PAPERS

- 9.1 If you would like to inspect background papers for this report, please email governance@barnsley.gov.uk so that appropriate arrangements can be made

10.0 REPORT SIGN OFF

Financial consultation & sign off	Senior Financial Services officer consulted and date <i>Joshua Amahwe (15/06/2022).</i>
Legal consultation & sign off	Legal Services officer consulted and date <i>Jason Field 12/07/22</i>

Report Author:
Post:

Sophie Wales
Service Director (Children's Social Care and (Safeguarding Services))

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Children in Care and Care Leavers Strategy 2022 -2025

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1 Introduction

Whether you are a young person in care, or left care, parent, foster carer, guardian; an elected local member of your council or social worker, we all have the best of intentions for children and young people who experience care.

Our ambition is for you all to receive the best possible care within a setting that provides stability and enables you to maintain wellbeing, make a successful transition to adulthood and independence, whilst achieving your aspirations.

Recent events have proved to be a long and defining challenge for all of us at every turn. However, for you as young people experiencing care and those leaving care, the impact of the Covid-19 Pandemic has been significant and long lasting.

In order to restore the level of progress, we all want for you as children in care and those leaving care, particularly in terms of health and education outcomes; permanence of placements; to keep you safe from all forms of harm and to be able to voice your experiences and concerns on your terms; to meet your needs and for you to become active citizens in sustainable local communities, we have developed the Barnsley Children in Care Strategy. This outlines our vision on how we will propose to deliver an outstanding level of practice and provision to you all.

We share a strong responsibility, and the objectives and priorities of our new Strategy will help to promote resilience, particularly to the rising costs of living and improve your life chances.as part of building social capital, re-shaping our communities and *“building back better”*

We commend the new Children in Care and Care Leavers Strategy to you all as an integral part of our ambition to commission and provide outstanding services for children and young people in care and those leaving care in Barnsley.



.....
(Councillor Trevor Cave: Cabinet Spokesperson (Children’s Services) Barnsley Metropolitan Borough Council



Sophie Wales

.....
(Sophie Wales: Interim Executive Director (Children's Services))

2 Strategic Vision

As we approach 2030, our overall vision for Barnsley is for it to become a *“Place of Possibilities”* This means a place in which all people can live in good health, feel protected and to go on and achieve their potential through quality education institutions, transport and connectivity, access to skills and sustainable employment.

Our Children in Care and Care Leavers Strategy forms part of this narrative, particularly through the following:

- *A Healthier Barnsley* – in which (a) everyone is able to enjoy their lives in good physical and mental health (b) where fewer people experience poverty and (c) people can access the right support at the right time and place
- *A Learning Barnsley* – where all children and young people can aim high and achieve their full potential with more people being able to access higher education and higher-level skills than ever before

At the heart of our service delivery to all young people who are cared for by Barnsley and to you as our care leavers who have been looked after previously is our commitment to the 7 principles of corporate parenting as outlined in the Statutory guidance published in February 2018 below:

- to act in the best interests, and promote the physical and mental health and well-being, of those children and young people
- to encourage those children and young people to express their views, wishes and feelings

- to take into account the views, wishes and feelings of those children and young people
- to help those children and young people gain access to, and make the best use of, services provided by the local authority and its relevant partners
- to promote high aspirations, and seek to secure the best outcomes, for those children and young people
- for those children and young people to be safe, and for stability in their home lives, relationships and education or work

3. Expectations for our children in care

We thank you all for providing us with your 'expectations' so we can ensure we are doing what you say and that we can monitor we are doing it well. We will make sure you get a good education, help you to enjoy life and prepare you for the future. The 6 expectations as below are our agreed joint 'expectations'.

a) We will look after you in a safe and caring home

We will:

- help you to live in a safe place, where you'll be cared for
- only move you if we have to
- help you to keep things that are important to you
- listen to you when you have any concerns
- find you a loving home as quickly as possible, that can and will last until you're ready to leave care

b) We will promote, support and respect your identity

We will:

- respect your right to privacy
- only share information with people that need to know as and when they need it
- help you as you grow up and provide you with a life story book
- tell you when you're doing well
- give you extra help if you need it
- show you how proud we are of you
- recognise your rights in relation to disability, sexuality and race
- support your right to both follow your culture and religion if that is your wish
- recognise that you need to be seen as individuals' worth of respect
- help you to discover your sense of who you are
- help you to stay in touch with your family if this is what you want
- support and encourage you to get involved in your community through volunteering work and helping others if you want to

c) We will make sure you get a good education

We will:

- keep you safe in school, and make sure that you feel safe
- make sure you know where to go in school to get support
- make sure you don't have to change school wherever possible, especially in years 10 and 11
- make sure you're given extra support within school when you need it
- support you to join in with activities in school and after school
- be aware that if you don't have good mental health this could affect your education
- make sure that if you're a school-age child you have access to a computer or device and the internet where you live
- support you whilst you're in further education and training beyond 16, including going to college and university, and help you plan for the future
- celebrate and promote your achievements

d) We will support you to be healthy

We will:

- make sure that you're registered with a GP and dentist
- make sure that all hospital, GP and dental appointments are kept and that you're supported to attend them
- make sure you don't miss out on things like football, dancing, swimming and going on holiday
- help you to eat healthily, play outside, and enjoy exercise
- help you to feel happy and good about yourself
- recognise that relationships are critically important to you
- help you when you're doing well or if you're struggling

We know that mental health and wellbeing are one of your biggest worries and the most important and urgent things that we have to improve.

e) We will prepare you for the future

We will:

- make sure you have a name personal advisor
- make sure you've got a bank account, birth certificate, passport and National Insurance number soon after your 16th birthday
- help you to fill out forms with other agencies, such as housing
- prepare you with living skills such as cooking, washing, ironing, cleaning and money management
- help you to develop your confidence and social skills

- help you with interviews
- make sure you don't pay council tax if you live in Barnsley
- let you know ways to contact your worker and if you leave a message for them that someone will get back to you as soon as possible

f) We will involve you in making it happen

We will:

- listen to you and your views
- act on what you say and tell you what we've done and when we've done it
- ensure that you're aware of your legal rights and entitlements
- always speak to you in words you understand
- always be honest
- always believe in you and never give up
- You have the right to say how you feel about your life.
- You'll always be listened to when we make decision about your life.

4. Key indicators that tell us what we are doing is what children and care leavers expect us to do and what we need to do better:

	18/19 Outturn	19/20 Outturn	20/21 Outturn	21/22 Outturn	20/21 Stat. Neighbours	20/21 National
Care Leavers - Percentage in Education, Training and/or Employment	62.5%	65.6%	71.2%	68.2%	50.1%	52.0%
Care Leavers - Percentage in Suitable Accommodation	95.4%	95.3%	90.9%	93.9%	91.0%	88.0%
Timeliness of Visits to Care Leavers (Percentage of Visits within 8 weeks)	78.4%	91.6%	98.7%	99.5%	N/A	N/A



	18/19 Outturn	19/20 Outturn	20/21 Outturn	21/22 Outturn	20/21 Stat. Neighbours	20/21 National
LAC Health Assessment Timeliness	95.7%	99.0%	100.0%	92.7%	92.7%	91.0%
LAC Dental Assessment Timeliness	99.5%	99.0%	33.0%	83.9%	33.9%	40.0%
LAC Strengths & Difficulties Questionnaire	76.7%	73.9%	96.9%	71.6%	82.2%	80.0%
LAC Reviews within timescales	98.5%	99.0%	99.4%	98.3%	N/A	N/A
LAC Visits Timeliness	98.8%	98.9%	99.8%	97.4%	N/A	N/A
Personal Education Plans (PEPs)	100.0%	99.5%	99.5%	98.2%	N/A	N/A
Termly Personal Education Plans (TPEPs)	98.0%	95.7%	99.0%	98.2%	N/A	N/A

	18/19 Outturn	19/20 Outturn	20/21 Outturn	21/22 Outturn	20/21 Stat. Neighbours	20/21 National
LAC Placement Stability: Stable Placement 2.5yrs+	64.1%	59.4%	67.3%	69.7%	68.3%	70.0%
LAC Placement Stability: 3+ Placement Moves	11.0%	7.0%	4.5%	10.6%	8.3%	9.0%

	18/19 Outturn	19/20 Outturn	20/21 Outturn	21/22 Outturn	18/19 Stat. Neighbours	18/19 National
LAC Education: Attendance (Primary & Secondary)	95.5%	95.8%	N/A	93.5%	96.1%	95.7%

5. What do we need to do more of and be better?

We want to increase our numbers of foster carers so we can ensure all our children are placed with Barnsley foster carers. We have a robust marketing and communications strategy for 2022/23 to help us to do this.

We have a target to recruit 23 new carers in 2022/23 and we are making excellent progress with 2 newly approved and 14 planned to fostering panel in the first half year already. As part of the recruitment strategy, we are targeting carers for all fostering schemes. This year we also want to invite you to be more involved in our recruitment.

We are seeing a slight improvement in children experiencing stability in long term care but we need to see an improvement on the number of placement moves that sometimes you as children in care experience. With additional carers we are hopeful this will improve as we will have more choice and capacity.

We have an emotional health and wellbeing support worker working with carers and some of you young people, which should positively impact on placement stability. We want to expand on our resource by considering more therapeutically trained practitioners to support consultations and to enable reflective team discussions with social workers, residential staff and carers in how to best meet your needs.

We have a new stability pathway and a new weekly Vulnerable Placement Panel. Although this is still in its infancy, we believe this new development is contributing to this improvement.

We currently have 19 young people in external residential provision. We don't want young people placed in external residential homes. We want you to be local to Barnsley when it is appropriate to do so and is in keeping with your wishes.

Some of the above will be achieved by opening a new residential home. This has had some significant delay in identifying a suitable property, but it is hoped this will be achieved in 2022/23. We want you to help us develop this plan this year and shape the service.

We want to reduce our use of Independent Fostering Agencies (IFA) carers by 8 in 2022/23. We have seen a significant reduction from September to March but we want to see this trend continue with a further reduction as we increase our inhouse capacity so we can support you to stay local, in communities that are familiar to you.

Some of you may have been involved in our annual takeover day. Mentors have now been recruited and we will be communicating with you all who are interested in being matched. This scheme will give you an opportunity to share personally your career ambitions and aspirations with suitably experienced mentors.

We need to build on our ongoing success with regard to the % of Care Leavers 19-21 in Education, Training and Employment (ETE). We have over the last few years met our annual target of 65% and this year our reported out turn for 21/22 was 68.2%. Our performance compares favourably with statistical neighbours and national averages. In 22/23 we have raised our performance target to 68%.

We want to progress a new care leavers hub for you at Commerce House. This will support more engagement for you and staff will always be available to see you. This central resource we think will be really welcomed as a friendly venue and we can also use it for your Care4Us Council meetings and other work streams.

6. Care4Us Council

We know we need to increase membership and representation of children in care and care leavers on the Care4Us Council, the new youth Voice and Participation Coordinator, support worker and existing cohort are planning on developing an ongoing recruitment and training programme.

You who are members of the Care4Us Council will support us to develop a dynamic workplan which captures the foreseen annual workstreams e.g., Takeover Day, celebration events and allows for ongoing and joint work with other Youth Voice Forums.

We want you all to promote these expectations on behalf of all Barnsley's Children & Young People and those leaving care. We want to ensure they stay true to our intentions, and we will support a rolling review of the outcomes including getting your feedback through the use of a smart survey, Facebook poll's, user satisfaction and review meetings.

The Care4Us Council will promote The Local Offer for Barnsley's Care Leavers, its purpose and its intentions and support a rolling review of the outcomes for you young People who have left our care. We will do this through the use of a smart survey, Facebook poll's, user satisfaction and review meetings.

We also want to progress and establish drop ins for you all with the relevant secondary schools/academies to ensure we are reaching out further to all young people in care.

We know we need a succession plan for the future of the Care4Us council members, specifically we want to expand the service to ensure we are also incorporating and ensuring there is representation and voice of our younger children.

We want to further build relationships with and support carers in enabling you all to participate by attending Foster Carer Forums regularly. We also want to progress more participation and attendance at foster carers association meetings, support groups events and activities to build relationships and to ensure we are promoting youth voice and participation activity

We will build on existing links with Barnsley Youth Council and promote joint work wherever possible to ensure that your voice is truly represented in decision making processes across the Childrens partnership.

7. Arrangements for Monitoring and Review

This is a 3-year strategy and will be reviewed and refreshed annually to ensure the strategy remains effective by evidencing progress against 'What do we need to do more of and be better'.

You as children in care and our care leavers will also be consulted on in relation to any reviews and will have ongoing opportunities to monitor how we are achieving 'what we need to do more of and be better'.

The outcomes relating to the strategy will also be regularly reported to senior leaders, elected members and to the Corporate Parenting Panel. Relevant service areas have performance indicators which measure how well we are achieving our strategic aims for you, and these are closely monitored and tracked at different levels within our service areas.

We want to now create an action plan from this strategy with you so we can ensure we are tracking all our developments. We will introduce a new Corporate Parenting subgroup, chaired by the head of service for children in care.

Barnsley Metropolitan Borough Council
Westgate
Western Street
Barnsley
S70 2DR

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Equality Impact Assessment

Stage 1 Details of the proposal

Name of service	Children's Social Care and Safeguarding
Directorate	Children's Services
Name of officer responsible for EIA	Interim Head of Children in Care Services
Name of senior sponsor	
Description / purpose of proposal	Barnsley Children in Care and Care Leavers Strategy (2022-25)
Date EIA started	1 st June 2022
Assessment Review date	31 st May 2023

Stage 2 - About the proposal

What is being proposed?	The Borough's inaugural Children in Care and Care Leavers' Strategy has been developed for approval and adoption by Cabinet
Why is the proposal required?	This Strategy has been formulated as part of the Council's statutory responsibility towards improving the range of outcomes for children in care and young people leaving care. It builds upon both our 'Pledge' to children in care and our local 'offer' to young people leaving care, by going as far as possible to shield and support these groups of young people particularly from the long-term impact of the Covid-19 Pandemic on their lives, together with the impact caused by the rising costs of living.

What will this proposal mean for customers?

Please see above.

Stage 3 - Preliminary screening process

Use the Preliminary screening questions to decide whether a full EIA is required

Yes - EIA required (go to next section)

No – EIA not required (provide rationale below including name of E&I Officer consulted with)

Stage 4 - Scoping exercise - What do we know?

Data: Generic demographics

What generic data do you know?

Underlying data used to ensure equality of provision will include the Schools Census, pupil rolls, Department for Education statistical releases; the Borough Profile, together with specific subject related information, such as assessments and plans

Data: Service data / feedback

What equalities knowledge do you already know about the service/location/policy/contract?

Please see above

Data: Previous / similar EIA's

Has there already been an EIA on all or part of this before, or something related? If so, what were the main issues and actions it identified?

This is the first such Strategy to be introduced and adopted in the Borough

Data: Formal consultation

What information has been gathered from formal consultation?

Consultation with children in care and young people leaving care, including representatives from the Barnsley Youth Council and Care4Us Council, on their experiences and the impact which events notably the Covid-19 Pandemic and the restrictions this imposed, together with the rising cost of living has meant to their mental and physical wellbeing. The Strategy forms an integral part of the Council and its statutory partners full commitment to maintaining stability in the lives of this vulnerable and disadvantaged group of young people, promote their life chances and to reduce inequality and deprivation.

One of the recommendations of the recent Independent Review of Children's Social Care is for children in care and care leavers to be ascribed protected characteristic status under the Equality Act

Stage 5 - Potential impact on different groups

Considering the evidence above, state the likely impact the proposal will have on people with different protected characteristics

(state if negative impact is substantial and highlight with **red text**)

Negative (and potentially positive) impacts identified will need to form part of your action plan.

Protected characteristic	Negative '-'	Positive '+'	No impact	Don't know	Details
Sex					None anticipated
Age					None anticipated
Disabled <i>Learning disability, Physical disability, Sensory Impairment, Deaf People, invisible illness, Mental Health etc</i>					This matter will be the focus of our separate developing local 'offer' to children and young people with special educational needs, including disabilities
Race					Positive
Religion & Belief					As above
Sexual orientation					As above
Gender Reassignment					As above

Marriage / civil partnership		N/A			
Pregnancy / maternity		N/A			

Other groups you may want to consider					
	Negative	Positive	No impact	Don't know	Details
Ex services					Targeted support and intervention will continue to be provided to children and young people in need of additional help as part of the Armed Forces Covenant
Lower socio-economic					Positive
Other ...					-

Stage 6 - BMBC Minimum access standards

If the proposal relates to the delivery of a new service, please refer to the Customer minimum access standards self-assessment (found at)

If not, move to Stage 7.

Please use the action plan to be taken to ensure the new service complies with the minimum access standards. Reasonable adjustments for disabled people.

Not yet live

The proposal will meet the minimum access standards.

The proposal will not meet the minimum access standards. –provide rationale below.

Stage 7 – Action plan

To improve your knowledge about the equality impact . . .

Actions could include: community engagement with affected groups, analysis of performance data, service equality monitoring, stakeholder focus group etc.

Action we will take:	Lead Officer	Completion date
Analysis and follow up action from performance data, linked both to the Strategy itself and the Virtual School for vulnerable children's development plan	Head Children in Care Services and Head of Education and Partnerships	March 2023

Engaging with children in care and young people leaving care through relationship-based social work practice, regular assessments and direct contact in order to gain an insight into each individual's experience as part of targeting support and intervention.	Head of Education and Partnerships	March 2023

To improve or mitigate the equality impact . . .

Actions could include: altering the policy to protect affected group, limiting scope of proposed change, reviewing actual impact in future, phasing-in changes over period of time, monitor service provider performance indicators, etc.

Action we will take:	Lead Officer	Completion date
Programme of general and targeted consultation	Head of Children in Care Services	March 2023
Identifying, disseminating and introducing best practice, including via the Independent Review of Children's Social Care	Head of Children in Care Services	March 2023

To meet the minimum access standards . . .(if relevant)

Actions could include: running focus group with disability forum, amend tender specification, amend business plan to request extra 'accessibility' funding, produce separate MAS action plan, etc.

Action we will take:	Completion date

Not yet live

Stage 8 – Assessment findings

Please summarise how different protected groups are likely to be affected

Summary of equality impact	This Strategy will enable the Council to go further in supporting children in care and young people leaving care, including those with specific, additional needs under the PSED to maintain stability in their lives and maintain their health and wellbeing. This will act as the foundation for improving the range of outcomes; to promote their life chances and to reduce inequality in health and income
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Summary of next steps

Please see comments in previous section

Signature (officer responsible for EIA) Date

**** EIA now complete ****

Stage 9 – Assessment Review

(This is the post implementation review of the EIA based on date in Stage 1 if applicable)

What information did you obtain and what does that tell us about equality of outcomes for different groups?

BARNSELY METROPOLITAN BOROUGH COUNCIL

REPORT OF: Executive Director, Place Health and Adult Social Care

TITLE: Barnsley Safeguarding Adult Board Annual Report

REPORT TO:	Cabinet
Date of Meeting	17 August 2022
Cabinet Member Portfolio	Place Health and Adult Social Care
Key Decision	Yes
Public or Private	Public

Purpose of report

To inform the cabinet of the work undertaken by the Barnsley Safeguarding Adults Board (BSAB) during 2021/2022 and the publication of its latest Annual Report.

Council Plan priority

Healthy Barnsley

Recommendations

That Cabinet note the Annual Report, in conjunction with the progress of the Board in meeting its responsibilities to keep adults in Barnsley safe

1. INTRODUCTION

1.1 Following the introduction of the Care Act in 2015, Adult Safeguarding became a statutory responsibility and requires all Local Authority areas to establish a multi-agency Board with an independent chair. The main responsibilities of the Board are to

- ✓ Provide assurance that single agency and multi-agency responses to prevent and respond to safeguarding are robust
- ✓ Evaluate the need for a Safeguarding Adults Review (SAR) when an adult dies and there are concerns about the quality of the multi-agency responses
- ✓ Produce an annual strategic plan and report on progress against this in the annual report.

1.2 The BSAB annual report will be signed off at the BSAB meeting on the 21 July 2022 and is attached as Appendix 1. The Cabinet's Spokesperson (People: Safeguarding) attends BSAB meetings as an active member and receives all reports.

1.3 Summary of the report

- ✓ The number of concerns received increased by 9% (up from 2203 in 2020/21 to 2231 in 2021/22), evidencing the positive impact of our communications strategy. We are particularly pleased to see the increase in referrals from the public, family and friends and are planning work to understand what supported them to contact us to inform our communications strategy in the coming year.
- ✓ Barnsley is in line with regional and national comparators for demographic data of adults supported via safeguarding (age, gender, and disability)
- ✓ 93% of adults reported that safeguarding helped them to remove or reduce the risks of harm or abuse remained. Making Safeguarding Personal supports adults, with capacity to make this choice, to remain in situations where they may experience further harm.
- ✓ Barnsley residents report that they feel safer because of using services, our performance exceeds both regional and national comparators.
- ✓ Our strength in working together in partnership with the adult is reflected in the three case studies shown in the report.
- ✓ More adults received multi agency, safeguarding, support to address their self-neglect and hoarding and reported positive outcomes. The creation of the Hoarding Support Group, renamed the D' Clutter group in April 2022 has led to several self-referrals to the group
- ✓ The Board has been chosen to engage with a national self-neglect and hoarding research project, reflecting the good practice in place
- ✓ A Peer review by Yorkshire and Humberside Association of Directors of Adult Social Services took place in March 2022 and identified many areas of good practice. BSAB will oversee an action plan to progress areas of improvement, including the need to ensure changes in health do not negatively impact on safeguarding.
- ✓ A shared ambition to improve the synergy between the partnership boards was realised at a joint board development event and the improvements identified will be delivered via a shared action plan
- ✓ BSAB has a commitment to learn lessons and improve practice evidenced by the reviews completed that did not meet the statutory safeguarding adults review (SARs) requirements. Adult F, completed by Barnsley Safeguarding Children's Partnership, provided valuable learning about the impact of Covid. The review of Gillian by BSAB, highlighted the need for professional curiosity and the need to assess the adult and not allow family members to keep professionals out of the home. Seven-minute briefings are produced and widely circulated and regular multi agency learning events are held to share best practice. Action plans are monitored by the SAR subgroup and reported to BSAB

2. PROPOSAL

Cabinet is recommended to note the Annual Report, in conjunction with the progress of the Board in meeting its responsibilities to keep adults in Barnsley safe

3. IMPLICATIONS OF THE DECISION

3.1 Financial and Risk

3.11 The Service Director – Finance and his representative have been consulted in drafting this report.

3.12 The total cost of discharging the responsibilities of the BSAB in 2020/21 is £139,067 and mainly relates to cost of the independent Chair, Board Manager, Multi-Agency Trainer, and associated business support costs. The above is inclusive of additional funds provided by the Clinical Commissioning Group to fund Safeguarding Activities.

3.13 The Council is the largest funder, with the remainder of the funds coming from the Clinical Commissioning Group and the Police and Crime Commissioner (PCC).

3.14 Funding of £40k has been earmarked and carried over to 2022/23 (agreed by the BSAB).

3.2 Legal

No legal issues arising from consideration of this report

3.3 Equality

Not applicable – the report does not contain any information that requires an EIA

3.4 Sustainability

Decision-making wheel not completed – there are no implications for the local environment, tackling climate change or sustainability emerging through consideration of this report

3.5 Employee

No workforce implications arising from consideration of this report

3.6 Communications

The report will be available as a digital resource on the web site and can be printed, if required. Expected publication date September 2022.

4. CONSULTATION

All Barnsley Safeguarding Adults Board partners were consulted and provided the case studies.

5. ALTERNATIVE OPTIONS CONSIDERED

- 5.1 This has not been necessary as the purpose of the report has been to highlight the work of the BSAB and illustrate its compliance with the Care Act and Making Safeguarding Personal responsibilities

6. REASONS FOR RECOMMENDATIONS

- 6.1 The recommendation to note is made to give oversight to the work of the BSAB and illustrate compliance with the Care Act and Making Safeguarding Personal responsibilities.

7. GLOSSARY

None applicable

8. LIST OF APPENDICES

- Appendix 1: BSAB Annual Report 2021- 2022 (Word Version)

<https://www.barnsley.gov.uk/services/children-families-and-education/safeguarding-families-in-barnsley/safeguarding-adults-in-barnsley/barnsley-safeguarding-adults-board/annual-report-202122/>
(Annual Report webpage)

- Appendix 2: Annual report on a page 2021 – 2022

9. BACKGROUND PAPERS

Background papers used in producing this report are available to view by contacting the BSAB manager – CathErine@barnsley.gov.uk

Officer contact – Julie Chapman Service Director: Adult Social Care and Health)

Email –JulieChapman@barnsley.gov.uk

If you would like to inspect background papers for this report, please email governance@barnsley.gov.uk so that appropriate arrangements can be made

10. REPORT SIGN OFF

Financial consultation & sign off	Joshua Amahwe (01/07/2022)
Legal consultation & sign off	Marianne Farrell 4 July 2022.

Report Author: Cath Erine
Post: Adult Safeguarding Board Manager
Date: 4 July 2022

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Barnsley Safeguarding Adults Board Annual Report 2021 – 2022

For more information about Safeguarding - <https://www.barnsley.gov.uk/services/children-families-and-education/safeguarding-families-in-barnsley/safeguarding-adults-in-barnsley/>

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6. Safeguarding Adults Reviews (SAR) and Lessons Learnt
7. Ambitions for 2022/23
8. Board budget
9. Board structure
10. Board partners

1. Welcome

Welcome to the annual report of the Barnsley Safeguarding Adults Board.

Take a look at our video to hear from Bob Dyson QPM, DL, Independent Chair of Barnsley Safeguarding Adults Board.

[Foreword from Bob Dyson – Independent Chair of Barnsley Safeguarding Adults Board](#)



Hello, my name is Bob Dyson and I'm the Independent Chair of Barnsley Safeguarding Adults Board. Thank you for showing an interest in the annual report of the Safeguarding Adults Board for the year of 2021 to 2022. I hope you find the time and interest to read the full report, which can be accessed on the board's website.

If you do read the report, you'll see that it sets out many of the achievements of that year. A number of things have improved and it's too many to list in this short video. During the last year, we did continue to operate under COVID restrictions. The board met virtually over technology, and that's worked very well for us and enabled us to continue the work of the board without any break. The one exception to that being our customer engagement group who haven't had the technology and the training in order to keep going, but that I'm pleased to say that they are now back to meeting in person.

One of the key things we've done during the last twelve months was to try and raise public awareness of safeguarding issues. A big thrust of that was through the Safeguarding Awareness Week and last year saw Barnsley chair and host the first ever countywide launch of Safeguarding Awareness Week.

We work closely with such people as the football club and the markets to engage with the public trying to get key messages across. Recent months have seen some improvements in the number of referrals that we've seen from members of the public, where they've seen safeguarding issues and felt the need to raise them with us.

We consider that to be a real success story, something that we really want to encourage and to build on. We'll be doing more work on that in the coming year, including having a customer engagement office working with us who will go out and meet with the public in a much more structured way to try and get those messages out there so that we get to hear about the cases where our people need support.

We are always very keen to improve and there's been a couple of things that we've done over the last year that are notable on that front. One is that we met with the other partnership boards operate here in Barnsley just to make sure that between us we were covering all the issues that need to be covered and that we weren't duplicating effort and more importantly, having gaps appear where no one was doing the work as they thought someone else was doing it. An action plan come out of that and we will work smarter and better as a consequence of it.

At the back end of the year, in March, we went through a peer review where colleagues from across the region came into Barnsley and brought an outside perspective to the work that we do in safeguarding adults. That included an audit of actual cases that have been conducted here. I'm pleased to say that that peer review did not find any major failings in our approach and in fact, identified a number of strengths that we're very proud of. It did, of course, identify some areas that we will now look to implement, and we will do that in the coming year.

As Independent Chair, one of my roles is to be satisfied that the agencies who make up the Safeguarding Board are working effectively together to ensure that they're doing what they can to keep adults at risk in Barnsley safe with the resources that they have at their disposal.

I'm pleased to say that the last twelve months has seen them continue to show a real commitment to working together and to keeping people safe. So once again, if I can encourage you, please, to look at the full report and you'll learn a lot more detail about the work of the board. Thank you.

2. About safeguarding

All adults have the right to live free from harm, abuse and fear. Ideally, safeguarding supports someone to take control and to take action to feel safer, possibly with the help of workers and volunteers.

What is safeguarding?

- Supporting someone to take action to feel safe, which might involve providing information about support services, assisting with housing issues or raising concerns about the quality of the care they, or a loved one, is receiving.
- Working with the adult, or their family and friends, if they're unable to put things right and stop the harm without support from a worker or volunteer. This might involve reviewing their care package or referring them to a specialist service like domestic abuse or the police. The adult might agree that we need to work together to safeguard them using the Care Act definitions (Section 42 enquiry).
- Improving the quality of services to make sure that people get the best possible care and support by working with the Care Quality Commission (CQC) and commissioners.
- Ensuring that workers and volunteers who have harmed adults are investigated and, if necessary, referrals are made to professional registration bodies and/or the Disclosure and Barring Service (DBS).
- Working together to support adults who are self-neglecting and/or hoarding who are refusing all support and help.

Definition of abuse

Any action, deliberate or unintentional, or a failure to take action or provide care that results in harm to the adult.

There are many different types of abuse – find out more information about abuse on our [safeguarding families in Barnsley](#) website.

How do I report concerns about the safety of an adult?

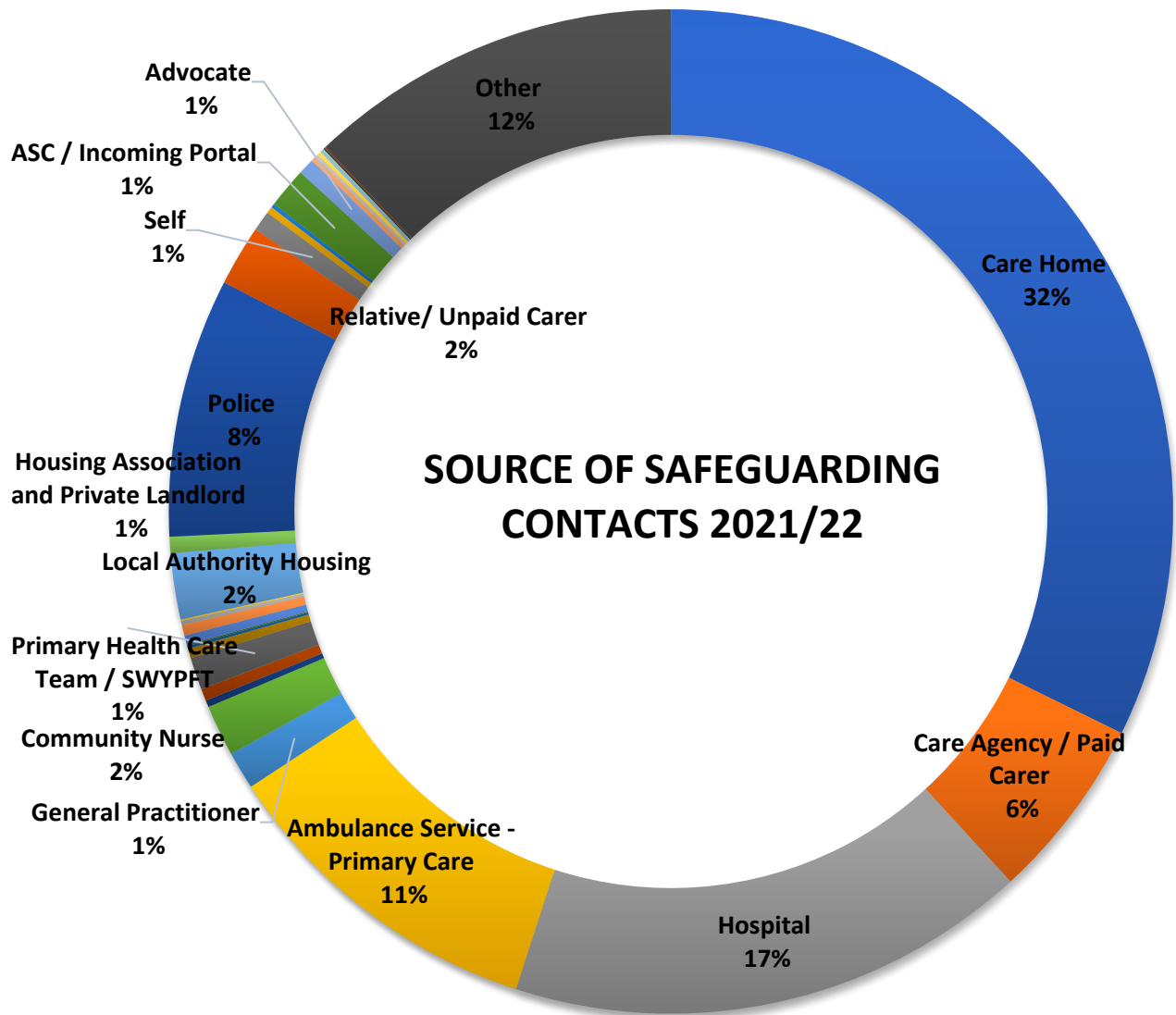
- Call Adult Social Care on (01226) 773300 or their out of hours line on (01226) 787789.
- If it's an emergency, call the police on 999.

3 Safeguarding activity

Barnsley received **2,231** safeguarding concerns in 2021/2022, which is a 9% increase on the number of safeguarding concerns received in 2020/2021 (2,023 concerns)

Concerns were identified and shared by the following organisations:

- Care home - 32%
- Care agency/paid carer - 6%
- Hospital - 17%
- Ambulance service - primary care - 11%
- General practitioner - 1%
- Community nurse - 2%
- Primary healthcare team/SWYPF - 1%
- Local authority housing - 2%
- Housing association and private landlord - 1%
- Police - 8%
- Self - 1%
- Relative/unpaid carer - 2%
- Adult social care/incoming portal - 1%
- Advocate - 1%
- Other - 12%



Barnsley Hospital has committed to increase knowledge of safeguarding adults to all staff by providing training, resulting in a 6% increase in the number of adults referred in 2021/22.

A change to the screening processes at the Adult Social Care front door has reduced the number of referrals from South Yorkshire Police being incorrectly recorded as safeguarding concerns. This work has helped adults get the right support for them in a timely manner, making sure concerns are directed to the right team, whether that's safeguarding, social care assessments or other local support.

Our commitment to improving the quality of data available has reduced the percentage of concerns listed as 'other' from 14% to 12%. This year, we've seen other housing providers and advocates being identified as referrers for the first time in our annual report.

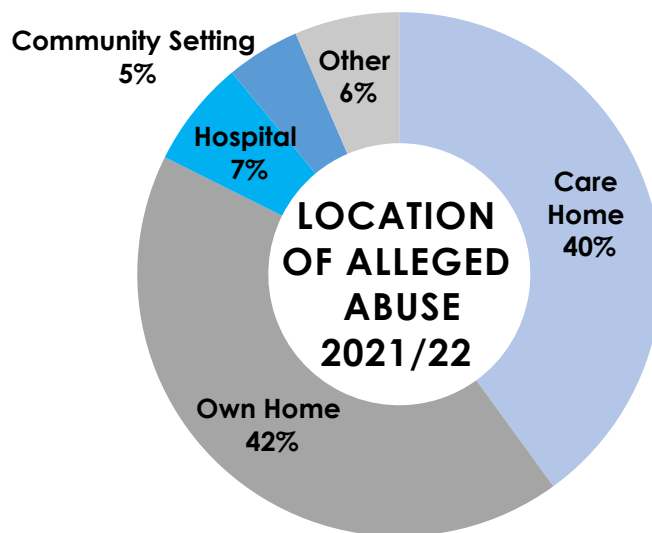
Referrals from doctors and other primary care staff remain at 3% of the total number of concerns received. However, a greater percentage have resulted in a safeguarding enquiry, demonstrating the high-quality referrals sent by GPs and practice staff. Work continues with GPs as they're well placed to identify patients at risk of harm and abuse.

We're pleased to report that concerns reported by themselves, their family and friends increased each quarter. This indicates that the impact of our communications strategy, including promoting Safeguarding Awareness Week, is reaching Barnsley citizens and supporting them to contact us for help and support.

Location of Harm

Locations of alleged abuse in 2021/22:

- Care home - 40%
- Own home - 42%
- Hospital - 7%
- Community setting - 5%
- Other - 6%



We're planning to increase awareness of adult safeguarding in the community to increase the number of referrals relating to adults living in their own homes in 2022/23.

The percentage of cases in people's homes has dropped from 51% to 42%, as this is not directly linked to an increase in the number of adults living in care homes. The Safeguarding Board is committed to protecting people from harm and abuse in the community and encourages everyone to look out for their families, friends and neighbours.

Safeguarding starts with a conversation with the adult to explore what help they want and how we can support them to feel safer in the future.

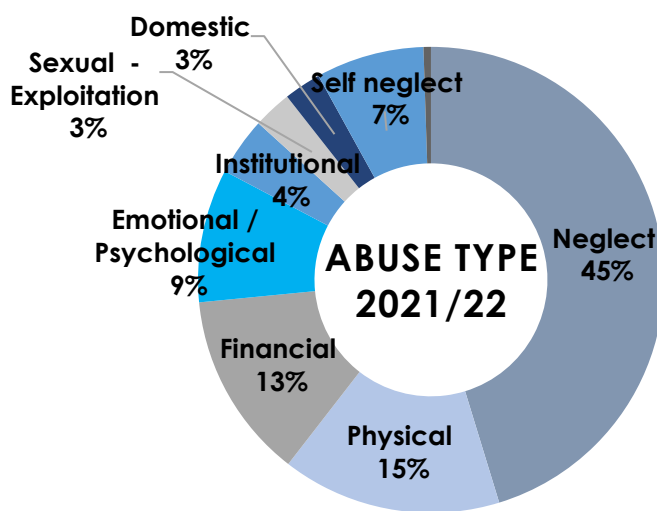
The concerns listed as hospitals include private hospitals in Barnsley, not just Barnsley Hospital.

What type of harm were reported and experienced?

Abuse type in 2021/22:

- Neglect - 45%

- Physical - 15%
- Financial - 13%
- Emotional/psychological - 9%
- Institutional - 4%
- Sexual exploitation - 3%
- Domestic - 3%
- Self-neglect - 7%



Over the past year, we've seen a rise in the number of neglect and physical abuse cases recorded in Barnsley.

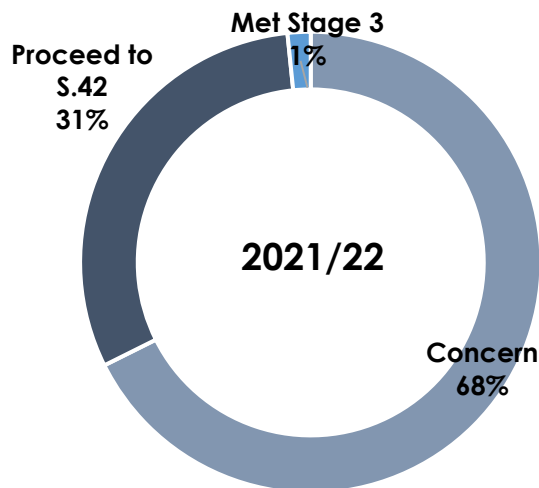
We're working to promote the support available for our borough's carers and to increase the public's ability to tell us if they're worried about their neighbours, friends or family.

We continue to work closely with our care providers, commissioners and the Care Quality Commission (CQC) to help them deliver high-quality care to adults in both care homes and their own homes.

Our work to help support adults struggling with self-neglect and hoarding has developed significantly over the past year, and we are delighted to see effective partnership working in place to help address this issue.

The board has been regularly updated on the impact of COVID-19, working together to identify solutions which minimise the risk to adults receiving care.

Safeguarding enquiries – helping adults to stop harm and to feel safer



Enquiries in 2021/22:

- Concern - 68%
- Proceed to Section 42 - 31%
- Met stage 3 - 1%

A Section 42 enquiry begins when an adult meets the three-stage test and agrees that they want help to stop or reduce the risk of harm.

Where an adult is unable to make the decision, for example, because of dementia, we'd use the Mental Capacity Act to confirm that they're unable to make this decision and decide if it's in their best interests for safeguarding to keep them safe.

Our safeguarding responses are very similar to previous years and in line with national averages, which suggest that 33% of safeguarding concerns result in safeguarding enquiries.

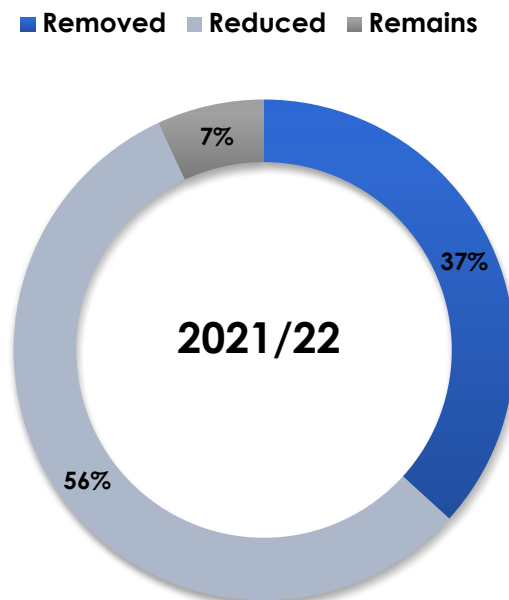
- 686 adults were supported to stop harm and abuse by a multi-agency safeguarding enquiry (Section 42). The majority were aged 65 plus.
- Demographically, the 684 adults supported by a Section 42 response are shown below; this is in line with our population demographic
 - Race
 - 80% of adults supported were white British.
 - 2.52% identified as black and minority ethnic.
 - Gender - the increase of referrals about men, noted in the 2020 – 2021 annual report, has continued to increase:
 - Women supported by safeguarding – 57%
 - Men support by safeguarding - 43%
 - Barnsley is in line with both regional and national comparators for gender.

Did we help adults feel safer?

Safeguarding aims to stop or reduce the risk of harm and to make people feel safer, if possible, by supporting them to be active partners in resolving the issues they face.

In 2021/22:

- removed - 37%
- reduced - 56%
- remains - 7%



In 2021/22 we removed or reduced the risks for 93% of the adults we supported.

Adults can choose to continue to have relationships with people who pose a risk to them, including family members and friends. Seven percent of adults valued these relationships more highly than the risks posed to their safety. In these cases, we advised them to contact us if they wanted support in the future to address the risk of harm and/or abuse.

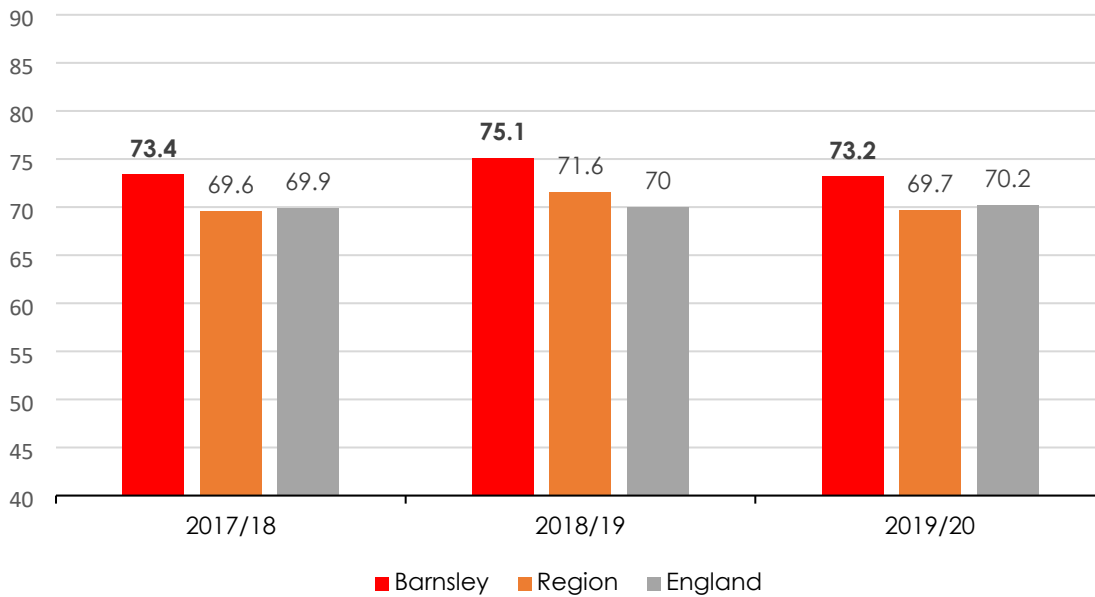
If a worker or volunteer is identified as the source of harm, a safeguarding enquiry will always take place, irrespective of the views of the adult. This is in line with our duties under the Care Act (2014) to respond to 'people in positions of trust', which includes workers or volunteers who may pose a risk to other adults.

Preventing harm and abuse

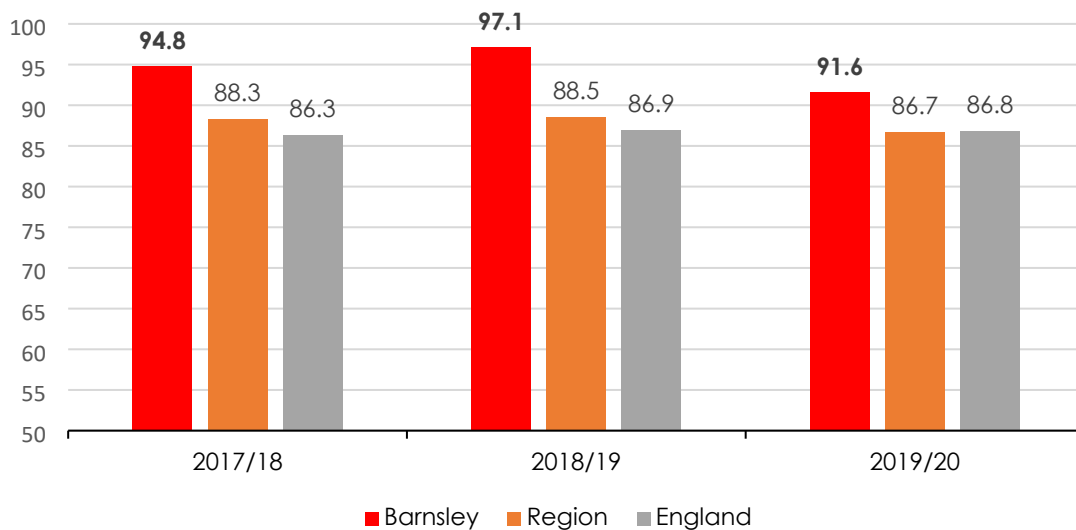
We're committed to preventing harm and abuse of adults in Barnsley. We do this by making sure that the services we provide are of a good quality and support adults to feel safe.

Barnsley remains well ahead of both regional and national comparators in the data provided to the Department of Health. The data is recorded in the Adult Social Care Outcomes Frameworks (ASCOF).

People who use services in Barnsley who say they feel safer – comparison of local/regional and national data



People who use services who tell us they help them feel safe and secure, showing local, regional, and national performance



The data for 2020/21 is not published until October 2022.

4 Case Studies

Emma (please note these are not the real names of the individuals involved)

[Emma's Story - Safeguarding Adults Board](#)

*names have been changed



Emma (age – 59) has struggled with mental ill health and alcohol problems for many years. Her problems escalated following the death of her son by suicide, 5 years ago. Emma has no contact with her daughter or other family members and has no social networks

Emma has a long history of ringing for help from ambulance, police, and other services, which resulted in a referral to the High Intensity User Group, a multi-agency group, who attempt to reduce unnecessary calls to “blue light” services. Emma was often transported to Barnsley Hospital where she developed a strong and positive relationship with staff.

Emma was convicted of arson in her flat in 2020 and sent to prison who identified memory concerns and referred her for a social care assessment. On release she was monitored by probation and subject to monitoring via MAPPA (Multi Agency Public Protection Arrangements) because of the risks posed by her offending

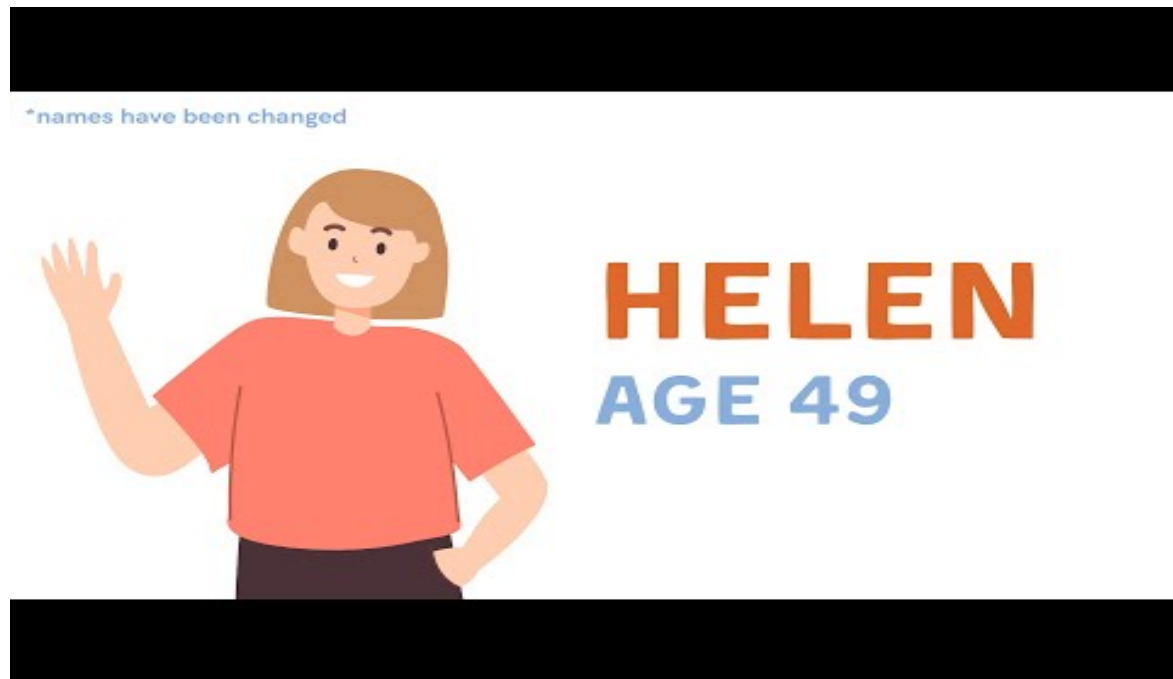
In 2021 she returned to Barnsley and was placed in residential care, however her verbal aggression resulted in eviction. A short hold tenancy with support from two workers lasted less than a week and resulted in a period of very chaotic behaviour and drinking. Information from the MAPPA meeting indicated that Emma had been diagnosed with an “Emotionally Unstable Personality Disorder” and was best supported by a “strong structure of care and support”

A multi-agency meeting attended by organisations who knew Emma well was held and as a result she was placed in a residential unit with support from two workers, at the start of 2022. A capacity assessment was completed which evidenced that Emma was unable to understand the risks linked to her behaviour and the necessary restrictions in her care plan to keep her safe were authorised by a Deprivation of Liberty Safeguard’s standard Her relationship with staff at Barnsley hospital enabled an assessment of her physical health to confirm if her claim that she needed crutches and/or wheelchair were factual. Emma and the hospital agreed that she did not need these walking aids.

Emma reports being “happy “in the unit and her drinking is rarely an issue and the unit have not reported any concerns that would put the placement in jeopardy.

Helen (please note these are not the real names of the individuals involved)

[Helen's Story - Safeguarding Adults Board](#)



Helen (49) was referred to Adult Social Care, by her daughter who was concerned that Helen was hoarding and not looking after herself. Adult Social Care picked up the case in February 2021 and started to build up a relationship with her. Helen has a history of mental ill-health, substance misuse and has lived with domestic abuse for many years.

Initially Helen was reluctant to engage with professionals and would not let anyone into her home, so conversations with Helen took place at her mum's house, who she felt safe with.

Helen lives in a three-bed house, managed by Berneslai Homes, who had been unsuccessful in completing the required checks on her boiler, despite many attempts and this forced them to "cut off" her gas supply.

Helen's partner, who frequently took high value items to sell, which contributed to Helen's desire to have "spares" in the property. His death in 2021, ended the domestic abuse, he subjected her too, however this loss added to Helen's hoarding behaviours.

Due to the concerns about fire safety, her physical and mental health the case was escalated into the Self-Neglect and Hoarding process, part of Adult Safeguarding. As a result, three agencies began working closely with Helen and each other to share the responsibility of building relationships and addressing the risks. (Adult Social Care, Berneslai Homes (Mental Health Tenancy Support) and Safer Neighbourhoods.) As a result of the persistent and empowering approach taken, Helen felt able to let workers into her home and this allowed Berneslai Homes to service the boiler and complete other improvements to her home. South Yorkshire Fire and Rescue were able to assess fire risks and put in place the necessary alarms etc.

Helen was invited to all the meetings but chose not to attend but has continued to engage with the workers, sadly Helen's mum died unexpectedly, and it was feared that Helen would disengage, fortunately this did not happen.

Helen is no longer being managed under the self-neglect and hoarding processes as the risks have reduced, however she still receives regular support, it is hoped that she may be able to move to a smaller property and consider accessing other support in the coming months

The workers have benefited from the mutual support from working together to support Helen over many months and Ellen has regained her faith in contact with workers.

James (please note these are not the real names of the individuals involved)

[James' Story - Safeguarding Adults Board](#)



James (37) was referred into Neighbourhood nursing services in October 2020 following a hospital admission for abdominal pain, vomiting and loose stools. Diagnosed with a diabetic Ketoacidosis. James has a history of Type 1 Diabetes, Severe left ventricular Dysfunction (heart Failure), anaemia, severe kidney disease and hepatomegaly (enlarged liver). It was noted on his discharge letter that he had been referred to learning disability team for support although learning disability had not been confirmed. He was initially treated with intravenous fluid and a fix rate insulin in accident and emergency department however transferred to intensive care due to poor access and a central line was inserted. He was very unwell whilst in hospital. On discharge James had voiced that he was struggling to manage at home particularly remembering his insulin. James had had numerous admissions to hospital in the past with diabetic related problems. James had not particularly engaged with health professionals in the past and had managed his condition himself.

James lived with his mum initially however prior to admission had moved to a Berneslai homes flat and was living independently with ongoing adhoc support from his mum.

Following the initial assessment visit and subsequent visits to provide education and support to James regarding his condition and management there were concerns regarding his capacity around his Diabetes care, treatment, and management. He was very frail in appearance and due to his admissions to hospital very vulnerable with the possibility of a fatality in his poor management of his condition. As a result, discussions were held with the trust safeguarding team for advice and a decision to arrange a professionals meeting to discuss his case was made. This took place involving all professionals from health and social care that had been involved with him to discuss concerns along with adult safeguarding team for support and trust legal team.

As a result, a capacity assessment was carried by the Diabetes Specialist nurse around his Diabetes care and treatment. Initially there was concern that James had some understanding however due to his concrete thinking around his disease was unable to manage his condition effectively. James was involved in the meetings to be able to voice his wishes around his care and support. Several services were involved in supporting James (Social Worker, District Nurses, Diabetes Specialist Nurses, Community Matron, Continuing Health Care and GP). Community Matron visited on a regular basis to build up a relationship with James and ensure he was involved in all decisions being discussed regarding his care whilst ensuring his wishes were taken into consideration as he was reluctant to engage with nurses visiting daily to support with his insulin management. During the time that meetings were being held James developed bilateral retinal detachment (retinas of the eye had become detached resulting in loss of sight) which required surgery to maintain a level of eyesight. This was a complication of his poor management of his condition. Throughout the episode of care, the multi-agency self-neglect pathway has been used to support the process.

As a result of continual support and empowering James with his care, working with him to achieve his outcomes, he agreed to accept support. He now has a care package for support with meals three times per day, shopping weekly, District Nurses visiting twice daily to support and encourage James with his insulin administration, regular review from Diabetes Nurse specialist and ongoing monitoring from Matron. He is attending his appointments at renal unit on regular basis for review of his poor kidney function as he may, at later date require kidney transplant.

Previously James was being admitted to hospital on a very frequent basis and in quite a poor condition. Since referral to the service and the support that has been provided to James his admissions have reduced greatly and he is remaining well, for the severity of his condition. Professionals involved in his care have greatly appreciated the discussions and teamwork that took place to provide support plans and support to proactively maintain and level of health for James.

5 Key achievements

Achievements	Impact
<p>Safeguarding adults education programme</p> <p>A high-quality programme has been established, offering workers and volunteers free education and training virtually via Teams or face-to-face.</p> <p>As a result of this training post, Barnsley is now</p>	<p>The Safeguarding Adults Board can monitor which organisations are accessing training and how this impacts the quality of the safeguarding support we offer.</p> <p>We can influence the content of regional conferences to meet the needs of Barnsley workers and volunteers.</p>

<p>actively involved in shaping the South Yorkshire education programme.</p>	
<p>South Yorkshire safeguarding adults launch event</p> <p>In 2021, we held the first South Yorkshire-wide launch event at Northern College, where colleagues from across the region benefitted from specialist inputs and sharing their experiences of:</p> <ul style="list-style-type: none"> • Preparing young people for adulthood • Supporting adults who are self-neglecting and/or hoarding 	<p>The format was so successful that the event will be repeated in 2022, hosted by another regional local authority.</p> <p>Locally, a task and finish group has been created to improve the support we offer young people who may struggle to be safe adults or effective parents.</p>
<p>Safeguarding Awareness Week</p> <p>Radio advertising brought safeguarding messages into people’s homes and cars, with the aim of supporting people in Barnsley to share concerns about themselves, their families, or neighbours.</p> <p>A joint leaflet explaining adults’ and children’s safeguarding was produced and kindly shared by market stall holders during the week. The leaflet was also shared at several public-facing events.</p> <p>We saw a strong social media presence by all Safeguarding Adults Board partners during the week and supplemented by ongoing campaigns during the year.</p>	<p>The leaflet is available in care homes, pharmacies and support organisations across Barnsley. We'll continue to extend its availability across the borough.</p> <p>The SAFE customer group have agreed to deliver local public information events throughout the year.</p> <p>The Safeguarding Adults Board have agreed to fund a customer engagement post to improve the safeguarding knowledge of community groups and their ability to prevent and respond to safeguarding concerns.</p>
<p>Partnership boards working together</p> <p>A development event bringing together six boards took place to support us in working effectively on topics impacting us. These include domestic abuse, homelessness, modern slavery, and neglect.</p>	<p>We'll develop our ability to work together on shared issues by changing our meetings, creating shared data resources and building feedback mechanisms to reduce duplication and improve our ability to keep people in Barnsley safe.</p>
<p>Safeguarding adults peer review</p> <p>The Barnsley Safeguarding Adults Board invited the Local Government Association to review how well we safeguard adults and help us develop an action plan for any improvements needed.</p> <p>We'd like to thank all our colleagues who took part in this and shared their views.</p>	<p>Initial feedback says we're doing well and confirmed areas we'd previously identified for improvement.</p> <p>When the full report is produced, it'll be used to inform our strategy and work plan for the coming year.</p>

Achievements	Impact
<p>New guidance and policies developed</p> <p>Our guidance and policies are regularly reviewed and updated to support workers and volunteers to keep adults safe in line with best practice.</p>	<p>Workers and volunteers always have access to current policies and guidance.</p>
<p>Increase in the number of self-neglect and hoarding positively resolved</p> <p>Learning from recent cases, new policies and a commitment to partnership working has led to an increase in the number of adults supported to resolve the risks linked to their self-neglect and/or hoarding.</p> <p>The customer-led hoarding support groups have been positively received.</p>	<p>Adults and workers are reporting that self-neglect and hoarding issues are being resolved.</p> <p>Only one safeguarding adults review request, following the death of an adult linked to their self-neglect, was received in the year.</p>
<p>Research</p> <p>The Safeguarding Adults Board has agreed to be part of three national research projects:</p> <ol style="list-style-type: none"> 1. Self-neglect and hoarding, led by the University of Sussex 2. Transitions, led by the University of Sussex 3. Medication safety in care homes, a PhD project with support from the South Yorkshire Integrated Cared System. <p>Some of these will run to 2024 but will support ongoing improvements.</p>	<p>We'll benefit from the learning and resources produced because of the research, and this will improve local practice.</p> <p>Care homes will be supported to manage medication in line with best practice.</p>
<p>Subgroups development event</p> <p>The subgroup members met to evaluate their performance and explore if changes could be made to membership, developing new relationships and priorities to improve their ability to deliver to keep adults in Barnsley safe.</p>	<p>The workplans for each subgroup have been amended and are regularly reviewed to help keep adults in Barnsley safe from abuse.</p>

6 Safeguarding Adults Reviews (SAR) and lessons learnt

The Care Act (2014) requires safeguarding boards to "consider all deaths or 'near misses' of adults we know or suspect were being abused or at risk of abuse, and partners may not have worked together to prevent the harm."

The Safeguarding Adults Review Panel meets monthly to consider all referrals, and Barnsley is committed to reviewing cases that don't meet the SAR criteria where we feel that we can improve practice by completing a lessons learnt review.

Safeguarding Adults Reviews

1) Lola (please note these are not the real names of the individuals involved)

Lola, an adult with learning disabilities, was admitted to the hospital emaciated and dehydrated from her family home, who had been her carers. Lola required an intensive care bed and remained in hospital for many weeks. South Yorkshire Police interviewed the family about possible wilful neglect of Lola, and Adult Social Care offered support to two elderly relatives living in the household who were reliant on Lola's parents for care and support.

Several opportunities were missed to seek Lola's views in previous contacts with the family, as the professional was too accepting of the families' views that neither Lola, nor they, required any support. Most professionals didn't have a conversation with Lola on her own to establish her views and wishes. Failure to support or bring Lola to her appointments did not generate the expected level of professional curiosity about her circumstances. Work has been commenced, in collaboration with GPs and the Health and Wellbeing Board, to improve our ability to track and respond to adults with learning disabilities who are not brought to health appointments.

Lola has made good progress and is living in supported accommodation, where she's developing skills in cooking and budgeting. Her social network has grown, and she reports that 'I'm alright now to be here. Listening to music and having a nice chillin' time in my bed.'

You can read the [full report regarding Lola](#) or the [seven-minute briefing about Lola](#).

2) Mr J (please note these are not the real names of the individuals involved)

Mr J died in hospital because of his non-engagement with health services, also known as self-neglect. He had a long history of mental ill-health and struggled with relationships, in part because of his inability to manage his emotions or money. Mr J was a probation client, and they referred his case to the Safeguarding Adults Review Panel.

A review has commenced and a report will be published in autumn 2022.

Learning review: Adult F (please note these are not the real names of the individuals involved)

Adult F, aged 18, died at home following a fall in the bathroom.

F lived with his mother, and his father was a regular feature in his life. Historical social care referrals began when F was six, reporting verbal and physical abuse by his mother and father. Later, when he was a teenager, there became counter allegations of fights and F returning his mother's abuse.

He was in 'child in need planning' at the age of nine and 13 to 15 years. He was known to Children's Services when he was 16 and 17. There were additional concerns about his health, parents not attending appointments and a lack of engagement with professionals.

He suffered broken bones through playing on two occasions, but wasn't taken to hospital for over a week after the injuries occurred. F was referred to CAMHS and for Prada Willi tests in 2015. He had

moderate learning disabilities and was isolated at school with few friends, relating to the staff better than the other children.

He raised concerns over his weight and self-harming (picking skin) with the school nurse. His parents did not follow up on medical tests or follow health advice for F, and failed to engage with CAMHS after his first appointment. F was morbidly obese at the time of his death.

As adult services held no information on the case, Barnsley Safeguarding Children's Partnership was asked to complete the review into his death. Key learning included:

1. Support or plans for cases with insufficient movement to be peer reviewed to help ensure progress to effective outcomes.
2. Share best practice strategies to address barriers and encourage family engagement.
3. Outline of the deep dive to be used as case study in neglect awareness and family engagement skills training.
4. Recording systems and professional curiosity to support information sharing between services.
5. Audit findings to inform the Neglect Strategy.

You can read a [seven-minute briefing on Adult F's case](#).

Learning review: Gillian (please note these are not the real names of the individuals involved)

We commenced a learning review into the circumstances of Gillian, an adult with learning disabilities, who was found in her family home with her deceased mother, who had died of natural causes. Her mother had been dead for several days before the police were contacted by a concerned neighbour and broke into the property.

The police found Gillian distressed, unable to provide her name or other information about other family members. As a result, they took Gillian to a mental health hospital for an assessment.

The review identified concerns about highly sexualised behaviour going back to childhood and an ongoing refusal to wear clothes. Gillian had very poor physical and oral health and had not been seen by medical services for several years. Gillian had a learning disability diagnosis as a child, but this did not result in transition into adult services.

The review identified several areas for development:

- Assessments, including mental capacity assessments, must be completed on adults who are thought to lack capacity to make these decisions, irrespective of the views of family members. Where possible, an advocate should be appointed to support the adult in expressing their views if possible.
- Non-attendance of health appointments, especially annual learning disability health checks, must be escalated and, if necessary, result in a safeguarding concern being shared with Adult Social Care. A 'was not brought' policy is being worked on, and this will support the escalation of concerns linked to non-attendance of all health appointments.
- Family assertions must be 'tested' to check their validity when an adult with learning disabilities is involved. Gillian's mother claimed that she attended college and was a volunteer with a local charity. However, there was no evidence supporting either of these claims.

- The creation of training and guidance to support workers to demonstrate persistence and professional curiosity when working with difficult to engage family members is being considered.

You can read a [seven-minute briefing on Gillian's case](#).

Learning review: Provider case

The Care Quality Commission identified concerns about the safety of services provided by a private organisation in Barnsley. Neither Barnsley Council nor the South Yorkshire Integrated Care System had a contract with them to place young people in their unit.

The provider offered support to people aged 16 and over, but it was not registered with Ofsted as the care extended until at least the age of 25.

Concerns identified

- All adults in the unit were placed by local authorities outside the borough, which meant social workers or families didn't regularly see them.
- Inappropriate and excessive use of restraint were regularly used by staff.
- High levels of violence between residents.
- High levels of self-harm and absconding.
- Staff were not skilled to work with these young people, and some had not received the required Disclosure and Barring Service (DBS) and pre-employment checks.
- Safeguarding children's concerns about the young people under the age of 18 were not shared with Adult Social Care. However, they were shared with the placing social worker and local authority.
- None of the young people were registered with a local GP.

Learning identified includes:

- The CQC and commissioning colleagues must share details of providers in Barnsley who do not have an existing commissioning relationship.
- Records are created in the adult social care system to track low-level and safeguarding concerns so we can share them with the placing agencies.
- Exploring the role of GPs in working with providers who have no commissioned relationship with Barnsley Council or the South Yorkshire Integrated Care System.
- The risks of out-of-area placements in non-commissioned services are shared at all relevant forums, including adult and children's commissioning and the Yorkshire and Humber ADASS.
- Barnsley will adopt an out-of-area checklist to protect adults placed outside of the borough.

A learning brief will be published by mid-August 2022.

7. Ambitions for 2022/23

- Develop our ability to work with all boards and partnerships in Barnsley to keep adults safe.
- Improve the knowledge and confidence of members of the public to recognise and report safeguarding concerns, to be our eyes and ears.
- Use early learning from the research to inform practice.

- Gather evidence that training is making a difference in practice.
- Use learning from the peer review to inform the development of our 2022/23 work plan.
- Deliver a community-based Safeguarding Awareness Week in November 2022.
- Be ambitious in our desire to learn from practice, not just when cases meet the criteria for a Safeguarding Adults Review.

8 – Board Budget

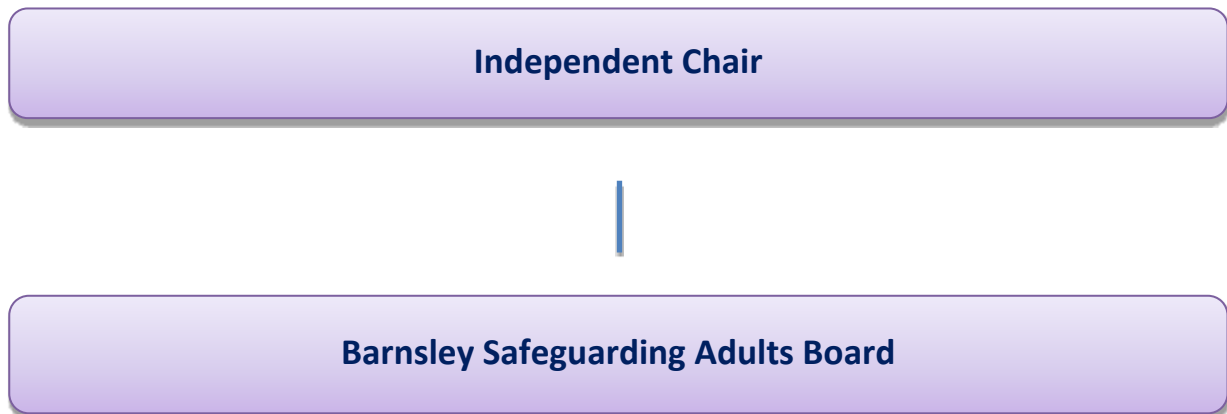
The table below shows the financial position of the Adult Safeguarding Board for the 2021/22 financial year:

	Expenditure
Employee Costs	93,066
Supplies & Services	24,217
Business Support	21,784
Total expenditure	139,067
NHS Barnsley CCG	-26,642
Police & Crime Commissioner	-20,429
Uncommitted resources from 20/21	-35,750
BMBC budget contribution	-97,240
Total funding / income	-180,061
budget underspend 21/22	-40,994

The underspend of £40,994 has been carried over to 2022/23, with the agreement of the Barnsley Safeguarding Adults Board. This underspend is due to the late recruitment of a new part-time multi-agency trainer and the temporary reduction in hours for another employee.

9 – Board structure

Barnsley Safeguarding Adults Board Structure



Performance Management and Quality Assurance Subgroup

Chair: Healthwatch

Safeguarding Adults Forum by Experience

Chair: Member of SAFE

Pathways and Partnership Subgroup

Chair: Adult Social Care

Learning and Development Subgroup

Chair: Barnsley Council

SAR and DHR Sub Committee

Chair: Independent Chair of BSAB

11 – Board Partner





Thanks to all our partners who have worked with us to demonstrate what they are doing to prevent harm and abuse every day.

Barnsley Safeguarding Adults Board Annual Report 2021-22

Our Safeguarding Adults Story in Barnsley



We received **2,231 safeguarding concerns in 2021/22**, a 9% increase on 2020/21.



More people were reporting concerns **for themselves, their families and friends.**



42% of alleged abuse reported to us **took place in people's homes.**



61% of abuse experienced was **neglect or physical, up from last year.**



57% of concerns reported to us were **for women needing our support.**



We removed or reduced the risk of harm and abuse **for 93% of the people we helped.**

Safeguarding is everyone's business.

If you feel you're being mistreated, harmed or abused, or you know someone who is, visit barnsley.gov.uk/safeguarding to report your concerns and get advice.

Want to see how we've helped people in Barnsley? Check out the case studies in our 2021/22 annual report.

Our ambitions and key achievements



To collectively work hard to prevent harm and abuse across Barnsley

Safeguarding Awareness Week, held in November 2021, was a real success, with another planned for this year. Our safeguarding adults education programme is now free to access, either online or in person.



To develop citizen-led approaches to safeguarding issues

We're learning from recent cases, our partners and communities to help people with self-neglect and hoarding. We have a local D'Clutter group, run by people struggling with hoarding, which has been well received.



To continue developing safe transitions for young people to adulthood

We made this topic a focus of our first South Yorkshire safeguarding adults event, learning from regional experts and partners. We've since set up a working group to improve the support we offer young people in Barnsley.



To learn and continually improve

We've been invited to be part of national research projects around self-neglect and hoarding. We continue to work closely with other safeguarding boards, locally and regionally, and recently welcomed a peer review into our work to keep adults safe.

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BARNSELY METROPOLITAN BOROUGH COUNCIL

REPORT OF: GROWTH AND SUSTAINABILITY

TITLE: CONTRACT AWARD FOR THE MANAGEMENT OF THE HOUSEHOLD WASTE RECYCLING CENTRES.

REPORT TO:	Cabinet
Date of Meeting	17 August 2022
Cabinet Member Portfolio	Environment & Highways
Key Decision	Yes
Public or Private	Public

Purpose of report

The purpose of this report is to seek approval for Barnsley MBC (the **council**) to appoint a service provider through a procurement in conjunction with Doncaster Borough Council and Rotherham Borough Council (together the **councils** or **BDR Partnership**), to award a contract for the management of their household waste recycling centres (**HWRCs**) and to approve the changes to the operational policies set out within this report.

This report is initially seeking support to re-procure HWRC services across Barnsley, Doncaster and Rotherham (**BDR**) and also sets out the service enhancement proposals which will form part of the tender specification. The form of contract will allow the ability to negotiate so that each authority can tailor the specification to their needs after considering the impacts on the MTFS and the practical applications throughout the borough.

Council Plan priority

- Healthy, Sustainable Barnsley – Looking after our environment by encouraging reuse, recycling and minimising waste.
- Growing Barnsley – Improving our reuse provisions for residents.

Recommendations

That Cabinet: -

1. Approve the option of undertaking a collaborative procurement jointly with both Doncaster Borough Council and Rotherham Borough Council leading to the award of a single joint contract between the councils and the successful service provider for the provision of the councils' HWRCs managed service including for

the four (4) HWRCs in the borough. The council delegates to Doncaster Borough Council the lead role in procuring the single joint contract using the Contract Procedure Rules of Doncaster Metropolitan Borough Council. Once the single joint contract is awarded (and during mobilisation and operation) the council will perform the lead operational contract management role under the single joint contract on behalf of itself and the other councils.

2. Approve the leasing of the four (4) HWRCs to the successful service provider.
3. Receive a further update on the responses to the procurement exercise and seek Cabinet approval before awarding the new single joint contract.
4. Approve the changes to the practices (including operational policies) at the HWRCs to align with Defra's final national proposals following its consultation on household DIY waste. The BDR councils have responded to this consultation and are awaiting the response from Government.
5. Authorise the council's Head of Property to agree terms for the lease of each HWRC site in readiness for service commencement of the new single joint contract to commence in late October 2023 and to instruct the council's legal services team to complete the lease documentation alongside the managed service contract.

1. INTRODUCTION

- 1.1 The BDR Partnership (made up of Barnsley MBC, Doncaster Borough Council and Rotherham Borough Council) provides a network of fourteen (14) HWRCs within the boroughs of Barnsley, Doncaster and Rotherham which are currently managed and operated under a managed service contract with FCC Recycling (UK) Limited and where the HWRC sites are intended to be leased by the relevant council to the service provider for the duration of the managed service contract.
- 1.2 Four (4) HWRCs are within the borough. The council has a statutory obligation under section 51 of the Environmental Protection Act 1990 to provide HWRCs to residents within the borough.
- 1.3 This report is seeking approval to procure a new HWRC managed service contract with an initial term of eight (8) years and an option to extend by up to a further two (2) years. The current contract had an initial term of three (3) years with an option to extend of up to two (2) years and expires in late October 2023. The length of the current contract did not allow the service provider sufficient time to recuperate any capital outlay which ultimately led to a lack of investment into the sites over the last five (5) years. Increasing the term will make it more attractive to bidders and will allow for substantial investments into the current service provision, enabling the BDR Partnership to transform services and increase our offering to residents.

- 1.4 As part of this procurement the BDR Partnership intends to increase the material types accepted on sites and improve the reuse facilities making them more accessible to residents.
- 1.5 Bidders will be incentivised into offering cleaner and greener technology, helping achieve our 2030 Sustainability priority.
- 1.6 To date Rotherham Borough Council have received Cabinet approval to start the procurement process and Doncaster Borough Council have been through their Purple (Equivalent) approval.

2. PROPOSAL

2.1 The four (4) HWRC sites in the borough are available for residents to dispose of their household waste and recycling. The new managed service contract will provide a modern and efficient service, embracing new technology to improve the service experience for residents and with an improved offer including:

- Enhanced use of modern technology delivering a more streamlined user-friendly permit system, real time information and monitoring.
- New equipment and signage
- Commercial waste offering at some sites, potentially including.
 - Inert/rubble
 - Asbestos
 - Plasterboard
 - Wood
 - Green waste
 - Cardboard
 - WEEE (electrical items)
 - Mixed waste (residual waste)

2.2 Two (2) borough wide consultations across Barnsley, Doncaster and Rotherham commenced in June 2022 and are live for eight (8) weeks. The first is aimed at residents to ascertain improvements that can be made to the service. The second is aimed at businesses to scope commercial waste demand and acceptance criteria.

2.3 A further robust market testing consultation document has also been prepared to send to potential service providers which will be complemented by a site visit to at least one of their existing HWRC contract sites.

2.4 The market testing consultation includes the following areas for discussion:

Implementation and delivery of:

- Automatic number plate recognition (ANPR) technology, hosting and managing the pan-BDR Partnership councils' permit system(s) including a residents' permit scheme to enable cross-border use of HWRCs within the BDR Partnership administrative areas
- Acceptance of commercial waste
- The expansion of re-use and hard to recycle materials

Contractual points such as:

- Indexation
- Key performance indicators and service performance standards
- Changes which may be necessary to implement the Environment Act 2021 and any accompanying secondary legislation published as Regulations.

2.5 In preparation for the new managed service contract, BDR Partnership officers from each of the councils are working to harmonise the HWRC operational policies across Barnsley, Doncaster and Rotherham. The current operational policies in Barnsley are as follows:

Construction Type Waste – Accepted at all sites. Residents can dispose of up to 5 sacks (25kg) of rubble/ soil/ construction type waste per visit with a maximum of 2 visits per year.

Asbestos – Accepted at the West Street site only. Asbestos is accepted from residents who have undertaken DIY work at their home. A maximum of five bags are accepted, each visit must be pre-booked, and an appointment made at prescribed times. This material must also be prepared correctly prior to acceptance at site. If a resident wants to dispose of more bags, then a charge of £15 per bag is applied.

Van Permits or trailer permits – Permitted at all sites, residents are required to apply for a booklet which contains 12 visits, this can be renewed annually. The permit booklet covers the following vehicles:

- a car with a trailer (maximum size 7' x 4')
- a 4x4 with pickup
- a small van
- any van under 5.2 metres in length
- a minibus (short wheelbase)
- a medium camper van

If the vehicle is sign written, then the resident will not be allowed to tip the type of waste advertised.

One-Off booking – One-off bookings are designed for residents who may need to hire a vehicle to move house, or a non-resident who may be clearing out a Barnsley property due to a bereavement. Each visit must be pre-booked, and the number of visits will be granted on a case-by-case basis.

Pedestrian permits – Pedestrian access is allowed at all HWRC sites, but residents need to apply with the criteria for issue of a pedestrian permit being that the resident needs to live within one (1) mile of the site, does not have access to a vehicle and the resident must call to arrange a visit. Pedestrian permits are issued to ensure safe access to the HWRC sites as due to the site layouts it is not possible to install pedestrian gates.

2.6.1 The proposals recommend the following changes to policies:

- **Construction type waste** – It is proposed to align with Defra’s recent consultation proposals which is to permit this type of waste resulting from householder DIY home projects to three hundred (300) litres (average car boot size) no more than once per week.
- **Van permits** – It is proposed to allow vehicles over 5.2 metres access to HWRC sites.
- **Cross-border use** – It is proposed to implement a cross-border use of HWRCs within the BDR Partnership councils administrative area, potentially through use of ANPR.
- **Introduction of commercial waste** - It is intended to allow commercial waste on the two (2) larger sites at Worsbrough and Goldthorpe. There is no known commercial “pay as you drop” sites within the borough allowing small and medium business enterprises (SMEs) onto an HWRC site to dispose of their waste. This would offer them an affordable and compliant disposal route for unwanted material. This has the potential to help reduce fly-tipping in the borough.
- **Asbestos** - It is proposed to change the asbestos policy to align to those already applicable in Rotherham and Doncaster by allowing a resident to dispose of up to eight bags of asbestos free of charge along with accepting large asbestos sheets (usually from a garage roof) where anything over these eight (8) bags/sheets will continue to be charged at fifteen pounds (£15) per bag/sheet.

IMPLICATIONS OF THE DECISION

3.1 Financial and Risk

- 3.11 Consultations have taken place with representatives of the Service Director - Finance (S151 Officer).
- 3.12 The current HWRC service is provided by FCC Recycling (UK) Limited (**FCC**) through a contract managed through the BDR Partnership. The annual budget of £0.928M covers the management, processing and haulage costs. Under this current contract the four (4) Barnsley and ten (10) Doncaster Borough Council and Rotherham Borough Council HWRC sites are leased by each council to FCC for the duration of the managed service contract. The current contract with FCC had an initial term of three years with an option to extend of up to two years and expires in late October 2023.
- 3.13 This report is seeking approval to procure a new HWRC managed service contract with an initial term of eight (8) years and an option to extend by up to a further two (2) years. Service providers will need to make substantial investment into the service provision to enable the BDR Partnership to transform services and increase the offer to residents. A longer contract term makes it more attractive as it provides a longer period to recover the capital outlay.

- 3.14 As part of this procurement the BDR Partnership intends to increase the material types accepted on HWRC sites and improve reuse facilities making them more accessible to residents. It also plans to incentivise bidders into offering cleaner and greener technology, helping achieve our 2030 Sustainability priority.
- 3.15 To date, Rotherham Borough Council have received Cabinet approval to start the procurement process and Doncaster Borough Council have been through their Purple (Equivalent) approval.
- 3.16 The prices for many services have increased significantly over the last twelve months for numerous reasons such as the below. These are expected to impact the tender prices.
- changes to red diesel legislation have resulted in an increase in fuel costs of almost two hundred per cent (200%)
 - inflation for May 2022 was 11.8% which is the highest since 1982
 - in March 2022 the price of steel increased by a record twenty-five per cent (25%).
- 3.17 Allowing commercial waste into HWRC sites will potentially help mitigate some of these increases and the BDR Partnership councils' officers are currently exploring the benefits of this option.
- 3.18 A series of government consultations have been released relating to the Environment Act 2021. Within this documentation Defra have implied that moving forwards local authorities will receive funding based on their provision of an efficient and effective service to residents. Although these terms are not yet fully understood it is possible that failing to modernise the HWRC sites and improve the current service could impact the grant funding the council could receive in the future.
- 3.19 Due to the timeline of the process (see table below), the BDR Partnership of councils cannot wait for the proposals in the Environment Act 2021 to be announced/clarified before awarding this new single joint contract. The drafting of the contract will need to acknowledge and address this issue.

Publish contract notice	05/09/2022 – 25/11/2022
Evaluation and negotiation	28/11/2022 – 10/02/2023
Approval to award	10/02/2022 – 27/03/2023
Mobilisation	28/04/2023 – 27/10/2023

- 3.20 In view of the above and some of the other proposed changes being considered by the BDR Partnership, the value of the contract will not be known until we receive responses to the tender. Once this process is complete a further report will be brought to Cabinet considering the full impact on the MTFs.
- 3.21 A separate report is being prepared to apply for capital funding for the four (4) HWRC sites to enable essential works to be carried out that includes the installation of drainage systems. The work will ensure that the council adheres to the HWRC sites' environmental permit requirements. Failure to install adequate drainage poses a significant risk of HWRC site closure. Work to stabilise the river embankment at the Penistone HWRC site is also required. The impact and extent of this work is not yet fully understood and a ground investigation survey has been instructed to ascertain the risks and costs involved. Routine maintenance will be funded from the council's waste disposal budget.
- 3.22 No Appendix A is required at this stage.

3.2 Legal

- 3.21 The council is a waste disposal authority for the purposes of the Environmental Protection Act 1990. Section 51 of the Environmental Protection Act requires a waste disposal authority to provide places which residents within its administrative area may deposit their household waste for disposal for free, that the arrangements are reasonably accessible to persons resident in the area and are available at reasonable times including weekend provision. It is however permissible to restrict the deposit of certain types of waste to certain sites.
- 3.22 Section 1 of the Localism Act 2011 provides the council with a general power of competence, allowing the council to do anything that individuals generally may do. Section 111 of the Local Government Act 1972 gives the council the power to purchase goods and services.
- 3.23 Section 123 of the Local Government Act 1972 sets out that the council has statutory power to dispose of non-housing/non-Housing Revenue Account land by way of a short tenancy of less than seven (7) years, without the Secretary of State's consent. Since the proposed lease of each Site has a maximum term of potentially ten (10) years (equivalent to the managed service contract) then the Secretary of State's consent is required except where the consideration is the best that can reasonably be achieved: here the combination of the managed service contract and the lease govern the arrangements with a service provider following a competitive tender exercise where the granting of leases is integral to the delivery of the service for the service fee but the lease rent is not a separate measure of consideration. It is expected that the HWRC site leases will be for a peppercorn rent and cross-default with the managed service contract. Best consideration is evidenced by the outcome of the tender exercise: the HWRC site leases provide occupational interests for the service provider to occupy the HWRC sites and the tendered price for the managed service contract evidences best consideration on award after applying the procurement evaluation methodology. It is not structured to have a contract price and rent operating in parallel.

- 3.24 As the leases for each HWRC site are intended to have a break clause in favour of the council (in the event the new HWRC managed service contract is not extended or on an early termination of the managed service contract) it will be necessary to ensure the leases are excluded from the statutory renewal provisions of the Landlord and Tenant Act 1954 to enable effective termination at the same time as the managed service contract terminates.
- 3.25 The procurement of the service will need significant legal advice going forward and must be carried in accordance in light of Doncaster Borough Council's own contract procurement rules (as they are the lead council managing the procurement exercise on behalf of all of the councils) and the Public Contracts Regulations 2015 (SI 2015/102).
- 3.26 In order to comply with the general duty on local authorities to act fairly, when the council is considering revising a policy such as this that proposes to remove benefits that are or might be conferred on members of the public, it is important that the council formally consults with relevant stakeholders. In order to undertake a lawful consultation exercise, sufficient reasons must be put forward for the proposals to allow for intelligent consideration and response by the stakeholders, adequate time must be given for consideration and response and the product of the consultation must now be consciously taken into account by the decision maker before a final decision is made on the proposals. There are a number of consultation exercises being undertaken in this matter as detailed in paragraphs 2.2 and 2.3 of this report. The outcome of the general BDR Partnership-wide consultation should also be considered before a decision is made on the matters consulted.
- 3.27 The decision maker must be aware of their obligations under the public sector equality duty (**PSED**) in section 149 of the Equality Act 2010. It requires public authorities when exercising their functions to have due regard to the need to: eliminate discrimination, harassment, and victimization; advance equality of opportunity; and foster good relations between people who share relevant protected characteristics and those who do not. The relevant protected characteristics under the Equality Act 2010 are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation. The duty also covers marriage and civil partnerships but only in respect of eliminating unlawful discrimination. The decision maker must ensure that they have seen the due regard statement. The duty must be exercised in substance, with rigor, with an open mind and is not a question of ticking boxes. It is for the decision maker to decide how much weight should be given to the various factors informing the decision and including how much weight should be given to the PSED itself. The duty is a continuing one and there should be a record/audit trail of how due regard has been shown. It is not sufficient for due regard to be a "rearguard action" following a concluded decision. The decision maker must also pay regard to any countervailing factors and decide the weight to be given to these, which it is proper and reasonable to consider - budgetary pressures, economics and practical factors will often be important.

- 3.28 The proposed form of managed service contract will be based on the Chartered Institution of Wastes Management (**CIWM**) short form service contract and will use a set of amendments previously applied by the BDR Partnership councils on the current HWRC managed service contract and various of their other offtake contracts. It will also be informed by the outcome of the soft market testing consultation exercise. A template form of lease will accompany the managed service contract in the tender documents (it is being discussed between officers from the councils' legal services teams based on their experiences of drafting leases for the current HWRC managed service contract).
- 3.29 The new managed service contract is to be procured with Doncaster Borough Council being the lead council for the procurement phase acting on behalf of all of the councils (so the council and Rotherham Borough Council delegate that procurement responsibility to Doncaster Borough Council). Once the managed service contract is awarded and entered into by all of the councils and the service provider (it is not a joint procurement with separate council contracts it is both joint procurement and operation) then operational contract management is led by the council as lead council (where Doncaster Borough Council and Rotherham Borough Council both delegate operation of the service and appointment of the authorized officer to the council).
- 3.30 The BDR Partnership proposal is to use the competitive procedure with negotiation approach to procurement. It offers flexibility for possible engagement and negotiation with bidders if their initial tender submissions are not thought sufficient on a "brown envelope tendering basis" by pricing against a fixed set of terms and conditions and a fixed specification. Given the anticipated need for more modern systems, processes and technology than used in the current HWRC managed service contract, the effect of the Environment Act 2021 requirements and likely horizon scanning plus a possible commercial waste service offering the councils can use negotiation with selected bidders to explore and enhance any initial tender submissions.

3.3 Equality

A full EIA has been completed as negotiation of contract is ongoing, EDI requirements will be factored into the contract, this EIA will be updated once we have secured a provider.

3.4 Sustainability



Waste generation - The award of this managed service contract will increase reuse and recycling opportunities for both residents and commercial customers by improving facilities at HWRC sites.

Pollution - This managed service contract will focus on increasing reuse and repair which in turn will reduce waste. It aims to increase the materials the councils can accept on site for recycling. Additionally, it will make waste disposal more accessible to local businesses which potentially could help reduce fly-tipping.

Greenhouse gas emissions - As part of the managed service contract the councils are asking prospective bidders to become the service provider to suggest how they can make the managed service contract cleaner and greener by reducing carbon emissions and pushing waste up the hierarchy.

Sustainable Barnsley – As outlined above, this managed service contract will focus on increasing reuse and repair which in turn will reduce waste, it aims to increase the materials the councils can accept on HWRC sites for recycling and additionally it will make waste disposal more accessible to local businesses (which potentially could help reduce fly-tipping.)

3.5 Employees

-

3.6 Communications

The Communications and Marketing service has already supported in promoting the BDR region-wide consultations. Further support in producing a communications and marketing plan, will be required to inform stakeholders of any relevant changes to the service once the contract commences. Co-ordination will be required between communications team partners across the partnership authorities.

4. CONSULTATION

4.1 This new managed service contract will be jointly procured between the BDR Partnership councils and lead to a single joint contract. Officers have worked together (and continue to work together to enhance or improve) to produce the specification, evaluation methodology, performance schedules and terms and conditions of the managed service contract as well as the template lease which will be broken out per HWRC site. Doncaster Borough Council's procurement team are leading the procurement exercise on behalf of all councils.

4.2 We have consulted with potential service providers.

4.3 Consultation has also been undertaken with:

- Procurement Team
- Finance
- Communications
- Legal
- Asset management

4.4 The Director of Environment and Transport and Head of Service have been consulted about the contents of this new managed service contract.

4.5 This report has been consulted with the Portfolio Holder for Environment and Highways to shape the service in preparation for the new managed service contract.

5. ALTERNATIVE OPTIONS CONSIDERED

5.1 The alternative options considered are as follows:

- **Bring the service provision in-house or contract independently** – The council does not have the resources to procure and/or deliver these services itself instead of outsourcing to a service provider. If it was to do an independent procurement the council would lose the efficiencies and economies of scale that the proposed procurement and delivery model with all councils delivers.
- **Do nothing** – The council has a statutory obligation under section 51 of the Environmental Protection Act 1990 which requires a waste disposal authority to provide places which residents within its administrative area can deposit their household waste for disposal for free.

6. REASONS FOR RECOMMENDATIONS

6.1 It is recommended that approval is granted to procure a managed service contract for the provision of HWRCs in the borough and approve the leasing of the four (4) HWRCs to ensure that the council remains compliant within the public procurement regime and with the requirements of waste management legislation.

6.2 This report sets out the service enhancement proposals which will form part of the tender specification. The form of contract will allow the ability to negotiate so that each authority can tailor the specification to their needs after considering the impacts on the MTFS and the practical applications throughout the borough.

6.3 It is recommended that the changes to the operational policies outlined within the report are approved to allow the BDR Partnership councils to maximise an effective and efficient service and to harmonise operational procedures across the joint managed service contract. These changes will improve the customer journey by making the HWRC sites more accessible to residents.

7. GLOSSARY

- ANPR – automatic number plate recognition
- BDR – Barnsley, Doncaster and Rotherham
- Defra – Department for Environment, Food and Rural Affairs
- HWRC – household waste recycling centre
- KPI – key performance indicator
- WEEE – Waste Electronic and Electrical Equipment.

8. LIST OF APPENDICES

Appendix A: No appendix A is required.

9. BACKGROUND PAPERS

There are no background papers for this report.

If you would like to inspect background papers for this report, please email governance@barnsley.gov.uk so that appropriate arrangements can be made

10. REPORT SIGN OFF

Financial consultation & sign off	Senior Financial Services officer consulted and date <i>Maq Ahmed 13/07/2022</i>
Legal consultation & sign off	Jason Field 22/07/22 Supported by Neil Tindall, Solicitor, BDR Partnership – 20 July 2022

Report Author: Victoria Chappell
Post: Recycling Manager
Date: July 2022

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BARNSELY METROPOLITAN BOROUGH COUNCIL

REPORT OF: EXECUTIVE DIRECTOR OF PUBLIC HEALTH AND COMMUNITIES

TITLE: Re-commissioning of Services for People with Multiple Needs (aged 16-24 years)

REPORT TO:	CABINET
Date of Meeting	17 August 2022
Cabinet Member Portfolio	Public Health and Communities
Key Decision	Yes
Public or Private	Public

Purpose of report	
The purpose of the report is to seek approval for the Business Case for re-commissioning the Multiple Needs Service for 16–24-year-olds (Appendix 1)	
Council Plan Priority	Outcome
Healthy Barnsley	<ul style="list-style-type: none"> • People are safe and feel safe. • People live independently with good physical and mental health for as long as possible. • Reduced inequalities in health and income across the borough
Learning Barnsley	<ul style="list-style-type: none"> • People have the opportunities for lifelong learning and developing new skills, including access to apprenticeships. • Children and young people achieve the best outcomes through improved educational achievement and attainment. • People have access to early help and support.
Growing Barnsley	<ul style="list-style-type: none"> • People are supported to have safe, warm, sustainable homes.
Sustainable Barnsley	<ul style="list-style-type: none"> • People live in great places, are recycling more and wasting less, feel connected and valued in their community.
All items contribute to the priorities and outcomes of the Council Plan 2021/2024 and performance management framework.	

Recommendation

That Cabinet approves the re-commissioning of the Multiple Needs Service for 16–24- year-olds as detailed in the business case, via a competitive procurement process.

1. INTRODUCTION

1.1 The purpose of this report is to present the business case for recommissioning the Multiple Needs Service for people aged 16-24 years. The service has operated in Barnsley since 2017 and provides accommodation and support to young people experiencing severe and multiple disadvantage.

1.2 Severe and multiple disadvantage is a term used to describe those experiencing several support needs at the same time. These typically include, but are not limited to, homelessness, substance misuse, poor mental and physical health, contact with the criminal justice system and domestic violence or abuse.

1.3 Evidence Base

1.3.1 The prevalence of severe and multiple disadvantage in Barnsley is highlighted by the findings of the local needs assessment¹, the incumbent provider's performance activity and data from specialist services.

1.3.2 The demand for the existing service is high; the capacity of the accommodation provision is 23 units occupied at rates of 95% and above between April 2021 and March 2022. It is positive to see that during the same period, 69.25% of people leaving the accommodation provision successfully accessed long-term, sustainable independent living accommodation.

1.3.3 The number of people aged 16-24 who were homeless or threatened with homelessness remains high. 495 individuals in this age group presented to the council's Housing Options Team for assistance between April 2021 and May 2022, equating to an average of nine per week, from this group, 67 were aged 16 or 17 years.

1.3.4 Young people aged 16 and 17 have a particular challenge, as they cannot legally hold a tenancy without a guarantor until they reach 18. They typically have fewer life skills and require more intensive support.

1.3.5 Discussions with people with lived experience supported the importance of specialist accommodation for 16-24-year-olds, especially those aged 16/17 years, highlighting the potential risk of sexual exploitation, coercion and domestic abuse in larger congregate settings.

¹ Appendix 2 – Multiple Support Needs – Needs Assessment Executive Summary

Such risks will be mitigated, alongside addressing challenges outlined in 1.3.4, by implementing changes to the service specification as outlined in section 2 of this report.

1.3.6 Demographic findings show factors contributing to the occurrence of severe multiple disadvantage within the 16-24 age group to be at higher levels within the borough. Evidence, detailed in the business case (appendix 1), also highlights children and young people under 16 are experiencing issues that are likely to evolve into severe and multiple disadvantage as they progress into the 16-24 age bracket, including mental health issues, domestic violence, substance misuse, offending behaviours and vulnerabilities associated with looked after children. Thus, highlighting the importance of the 16-24 years' multiple needs service to support those younger people whose needs are still prevalent upon reaching this age group.

1.3.7 There is a prevalence of severe multiple disadvantage in the 16–24-year age group within Barnsley, (further details within the business case, appendix 1), and so where we are still seeing young people presenting with associated needs, the service addresses this, as outlined below:

- Since 2017 the service has supported young people experiencing severe multiple disadvantage to address their presenting complex needs while simultaneously equipping them with the life skills required to successfully access and sustain their own tenancies and move onto successful independent living.
- The service has enabled people who use the service to reach their full potential and contribute to society, for example, by supporting people to access educational, training, volunteering and employment opportunities.
- Where appropriate, and in the best interests of the young person, the service provides mediation to successfully resettle them back into the family home.
- Where this is not the most appropriate option the service supports people to secure their own tenancies, for example, with Berneslai Homes or other social or private landlords.
- The floating/community support element of the service provides support to help ensure such tenancies are successfully sustained and people do not re- present to the service.

1.3.8 The service works effectively in partnership with specialist services where required and alongside the positive outcomes outlined in section 1.3.7 provides an essential function by:

- Providing support to address complex needs at an early stage, lowering the risk of such needs becoming entrenched behaviours that will significantly limit the life chances of young people.

- Mitigating the risk of repeat homelessness and exacerbation of complex needs as the younger cohort reach the 25+ age group, with needs in this age group becoming much more established and harder to address.
- Reducing the use and associated costs of Bed & Breakfast accommodation for discharging homelessness duty, by ensuring all referrals are made via the Councils Housing Options Service.
- Reducing the negative effects on young people, family and wider society related to the behaviours and needs of this cohort, alongside supporting individuals to contribute to society and ultimately living fulfilled lives.
- Reducing pressure on the 25+ multiple needs service by supporting those that would potentially become people that would use the older age group service without such early preventative support.
- Reducing operational and financial pressures on emergency services where young people without such support would typically present in crisis.

2. PROPOSAL

Re-commission the Multiple Needs Service for 16–24-year-olds

- 2.1 Evidence detailed in the business case demonstrates a need for a commissioned service that responds to the needs of people aged 16-24 years who are experiencing severe and multiple disadvantage.
- 2.2 It is our recommendation that the current specification is revised to allow the provision of a dedicated accommodation facility for 16–17-year-olds to address the gap highlighted in the needs assessment. This will require the reconfiguration of the existing accommodation attached to the contract but will not reduce the overall number of bed spaces available.
- 2.3 The remainder of the existing specification be retained to deliver the following elements:
- Assessment facility – for initial stays to allow people to be assessed with closer monitoring and support.
 - Longer stay accommodation – to provide more independence as people who use the service gain life skills and offer a transition back into mainstream housing while still receiving regular support.
 - Crash pad – emergency accommodation providing very short stay provision. This is often used to give space and time for family mediation during family breakdowns or when a young person is found to be rough sleeping and needs immediate accommodation.
 - Floating / outreach support - provides support to promote and help sustainable move on from the accommodation elements of the service.
 - Trauma-informed / holistic support provision - the recommissioned service will utilise a trauma-informed approach to support, delivered in a psychologically informed environment.

3. IMPLICATIONS OF THE DECISION

3.1 Financial and Risk

Financial

Consultations have taken place with representatives of the Service Director of Finance (S151 Officer) and are summarised below.

The proposal is to re-commission the Multiple Needs Service for 16-24 year olds. The current commissioned Multiple Needs Service for 16-24 years is provided by Centrepont at a cost of £499,863 per annum (2022/23 value) and is base budget funded.

The contract will be offered via a 'most economically advantageous tender', ensuring finance will be a material factor when selecting a new provider, balanced with quality. Should the re-commissioning exercise result in the selected provider coming in at a lower price than the current contract value of £499,863 the saving would be offered up as part of the MTFS.

The reconfiguration of the existing accommodation will not involve additional costs, as the current configuration of the service is provided across two properties that are owned by South Yorkshire Housing and Home Group and the service will continue to be provided in these properties. Currently both properties are used to accommodating all age ranges. As part of the re-commissioned contract it is proposed that Quarry View will be used to accommodate 18-24 year olds and Highfield Terrace will be used to accommodate 16-17 year olds.

The contract has synergies with the Housing Options Team Complex Lives Service in that the Housing Options Team place clients in the Multiple Needs Service, which alleviates the need for temporary accommodation, such as Bed and Breakfasts.

The business plan identifies other services across the Authority that touch on Multiple Needs Services for 16-24 years, some of which attract external funding. The Healthier Communities Commissioning Team, in liaison with Finance Business Partners will explore the use of funding in order to maximise the use of external funding resources and release base budget funding.

Risk

The latest MTFS / Transformation Paper, which requires the Services of the Authority to undertake zero-based service reviews, covers a period to the financial year 2025/26 – the recommendation to re-commission this contract for an initial 5-year basis would extend beyond that period.

3.2 Legal

As a local housing authority, the Council has a statutory duty under the Housing Act 1996 to provide a homeless applicant with accommodation pursuant to that Act. Under the Homelessness Reduction Act 2017, the Council has a duty to try to deal with or prevent homelessness at an early stage. The Council has separate statutory duties under the Children Act 1989 to accommodate persons aged 16 – 17 years pursuant to that Act. The recommendation in this report aims to support the lawful discharge of those statutory functions.

The Council is a local authority and a best value authority with duties and powers to make arrangements to secure continuous improvement in the way it exercises its functions, having regard to a combination of economy, efficiency and effectiveness pursuant to Part I of the Local Government Act 1999. The recommendation in this report to re-commission these services through a competitive re-procurement process is supported by the Council's powers under that Act.

As a contracting authority under the Public Contracts Regulations 2015, the Council has a duty to comply with the requirements of those Regulations in its re-procurement of these services. The recommendation in this report to re-commission these services through a competitive re-procurement process supports the discharge of the Council's duty under the Regulations.

3.3 Equality

A full Equality Impact Assessment has been completed to support the business case, the summary findings being:

The EIA identified the need to revise the service specification to better meet the needs of very young people.

Services will also be recommended to consider extra needs for pregnant service users, such as the need to attend hospital appointments or breastfeeding facilities and tailored information relating to substance misuse and pregnancy.

The service should also include support for those with physical disabilities and/or mental ill-health and learning disabilities to improve access to health and wellbeing services.

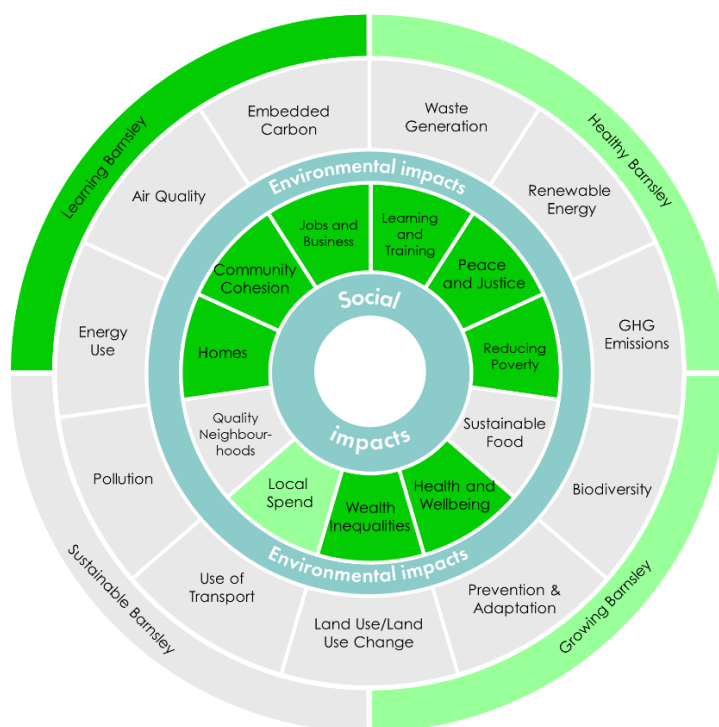
3.4 Sustainability

The service aims to reduce homelessness and rough sleeping via the provision of a range of interventions, working collaboratively with the council's Housing Options Team to facilitate access to safe and appropriate housing.

Education and training is at the heart of the service offer, supporting people who use the service to access appropriate learning and employment opportunities and identifying those with basic academic skills below the national average to provide targeted interventions.

Support is provided to make sure people who use the service have access to primary health care and access complementary services to deliver a holistic provision.

The service reports social value based on the employment of local staff, which during 2021/22 generated a social value of £476,000.



3.5 Employee

There are no direct council employee implications. Staff employed by the commissioned service are funded via the cost of the contract.

3.6 Communications

In the event of the service being recommissioned, a communications plan will be developed and actioned to inform relevant organisations of the provision.

The communications and marketing team will support the team with communications to any services, and link with our engagement team to speak to people in the service where necessary. The team will also support media enquiries and any wider comms where needed.

4. CONSULTATION

Consultation has been undertaken during the needs analysis with partner organisations and stakeholders, along with people who use the service and people with lived experience. These findings have been used to steer the business case and recommendations. Further details of the consultation activity and outcomes are contained within the business case, attached as Appendix 1, with the full needs assessment report available on request via the governance unit, as detailed in section 9.

5. ALTERNATIVE OPTIONS CONSIDERED

5.1 The future commissioning options available are:

Option 1 – Do nothing

If no action is taken, the existing contract will end 31/03/2023. The impact of service loss will increase pressure on emergency and crisis services and reduce the local authority's ability to discharge its statutory homelessness duty. It will also leave a substantial gap in the homelessness accommodation pathway, leading to a possible increase in homelessness/risk of homelessness for younger people. For these reasons, this option is not recommended.

Option 2 – Recommission the existing service specification

To renew the contract beyond the current end date, the existing service specification would be offered back out to the market, via a competitive procurement process to comply with procurement legislation. This would make sure that a service continues to be provided to people with multiple needs but would fail to deliver the recommendations of the research and may result in some duplication of service delivery with the new Housing Options Team Complex Lives service and prevent the implementation of the recommendations of the commissioned research.

Option 3 – Recommission in accordance with the recommendations of the business case

The service for people aged 16-24 years will be offered via a competitive tender using a revised specification, with a support and accommodation offer aligned to the research findings, reflecting recommendations set out in the business case, with the offer including a dedicated provision for 16/17-year-olds. The new service will commence on 1 April 2023 on an initial 5-year basis, with the option to extend for a further two years (in one-year increments).

6. REASONS FOR RECOMMENDATIONS

6.1 The findings from the needs analysis and the business case demonstrate a need for a service to support people aged 16-24 experiencing severe and multiple disadvantage. Based on this feedback, Option 3 – commissioning a service with an updated specification to include a dedicated provision for 16/17-year-olds, via a competitive procurement process is recommended.

7. GLOSSARY

None

8. LIST OF APPENDICES

Appendix 1: Business Case

Appendix 2 Needs Assessment Executive Summary

9. BACKGROUND PAPERS

Needs Assessment – Full report

If you would like to inspect background papers for this report, please email governance@barnsley.gov.uk so that appropriate arrangements can be made

10. REPORT SIGN OFF

Financial consultation & sign off	Avanda Mitchell 30 June 2022
Legal consultation & sign off	Joanne Haslam 23 June 2022

Report Author: Anne Asquith
Post: Senior Commissioning Manager
Date: 08/06/2022

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**Public Health and Communities Directorate
Healthier Communities**

**Multiple Needs
Supported Accommodation Provision
16–24-Year-Olds**

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ii) Document Management:

Version	Status	Details	Prepared By	Date
1	Draft		Louise Beaumont / Anne Asquith	April 2022
2	Draft	Amended to focus on 16-24 age group	Louise Beaumont	5 May 2022
3	Draft		Jayne Hellowell	5 May 2022
4	Draft		Louise Beaumont	6 May 2022
5	Draft		Louise Beaumont	12 May 2022
6	Draft		Louise Beaumont	24 May 2022
7	Draft		Jayne Hellowell	31 May 2022
8	Draft		Anne Asquith	1 May 2022
9	Draft	Amendments following Children’s DMT	Louise Beaumont	15 June 2022
10	Draft	Amendments following comments from Housing Options	Louise Beaumont	16 June 2022
11	Final		Louise Beaumont	29 June 2022

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1. Background and Context

1.1 Introduction

The Multiple Needs service for people aged 16-24 years was commissioned in 2017 to provide accommodation and support to the most marginalised individuals within this age bracket. These people typically present to the Council primarily for accommodation but also with additional multiple and complex needs, typically including substance misuse issues, poor mental health, offending, domestic violence and physical health issues/disabilities, and often ‘fall through the gaps’ of other services.

1.2 Contract & Service History

The service provides a range of supported housing options and community support. This includes assessment accommodation used for initial placements following homelessness and can be occupied for up to 12 weeks, a ‘crash pad’ for very short term (typically less than 7 days) emergency accommodation. Longer term accommodation is also provided, in which people that use the service receive outcome focussed support; with community outreach delivered in their settled accommodation. This is provided to people exiting the service to support their transition to longer term accommodation, or to those with existing accommodation, but whose support needs threaten the viability of their tenancy.

The contract will expire on 31st March 2023 with no legal basis to extend beyond this date.

1.2.1 Existing service

The service contract has been held by Centrepont since its commencement in 2017.



Figure 1

Figure 1 depicts the existing accommodation and support provided by the service.

The assessment unit, crash pad and some longer-term accommodation is located at Quarry View which is leased from South Yorkshire Housing (a Registered Social Landlord). Additional longer-term accommodation is located at Highfield Terrace, which is leased from Home Group (also a Registered Social Landlord).

Figure 1

Barnsley Councils Housing Options Team manages referrals into the accommodation elements of the service via a multi-agency panel. A joint protocol is in place with Children’s services to undertake joint assessments to ensure compliance with legislative requirements for 16/17-year-old referrals.

The service also provides a community or ‘floating’ support element which can be provided to support individuals prior or post a placement in the accommodation element, or to those whose tenancy is at risk by their support needs. The community support element operates an open referral route.

1.3 Impact of Covid-19

The national response to reduce rough sleeping during the Covid-19 pandemic was the ‘everyone in’ initiative which provided financial resources to Local Authorities to enable them to reduce rough sleeping in order to reduce the risk of infection amongst this cohort. The local response was to establish additional crisis accommodation capacity managed by the Housing Options Service. Service users who occupy this additional capacity will be supported by the newly established Intensive Housing Led Support Team, which is an integral service provided by the Council’s Housing Options team. The service is currently in development (2022) and more detailed in this report at Appendix A.

1.4 Re-commissioning approach

Much has changed since the existing multiple needs services were commissioned in 2017. The legacy of the pandemic has seen changes to the local accommodation and support pathway while there have been wider implications for the long term mental and physical health of our communities. To ensure the future service reflects the current levels and types of demand, a research analysis was commissioned to establish the following:

- What is known about the size and profile of those who might be defined as having ‘multiple and complex needs?’
- How should we define and describe the cohort?
- How are current services and pathways working for these individuals?
- What are the barriers to effective move-on?
- What has the impact of Covid been on these pathways and services, and what does this mean moving forwards?
- How might prevention be improved for this diverse group?
- What can be learned from good practice beyond Barnsley?
- What are the commissioning implications and recommendations of this evidence base?

A research company was commissioned in late 2020 to undertake this investigative research; the full findings of which are included in this report in Section 4 and underpin the recommendations for future commissioning.

2. Strategic Relevance

The service is aligned to the priorities and objectives of several national and local strategies, including:

2.1 National Context

2.1.1 Making Every Adult Matter (MEAM)¹

A coalition of national charities working together using their shared knowledge and practical experience to help shape and develop ‘effective, coordinated services that directly improve the lives of people facing multiple disadvantage’.

The service will continue to align to the ethos of the MEAM approach in design and delivery, ensuring a whole system approach that is:

- Person-centred
- Co-ordinated
- Holistic

2.1.2 Public Health Outcome Framework (PHOF)²

The service aligns to the Public Health Outcome Framework, contributing, both directly and indirectly, to the achievement of indicators in the following areas:

- Offending/re-offending
- Mental Health

¹ <http://meam.org.uk/>

² <https://fingertips.phe.org.uk/profile/public-health-outcomes-framework>

- Education/Training
- Domestic abuse
- Violent crime
- Homelessness
- Substance Misuse
- Self-Reported Wellbeing
- Premature Mortality

2.1.3 Everyone In¹ – National response to rough sleeping during the Covid-19 pandemic

In March 2020, during the early stages of the Covid-19 pandemic, the Government launched its ‘Everyone In’ initiative. This campaign was initiated as an emergency response to the health risks posed by the pandemic and included accommodating individuals who would not normally be entitled to assistance under homelessness legislation, due to them not being classed as ‘priority need’.

The ask of local authorities was to ensure those vulnerable individuals helped by the ‘Everyone In’ campaign were supported into longer term accommodation as opposed to returning to rough sleeping. Part of the Rough Sleeping task force’s response was the launch of the Next Step Accommodation Programme³, again looking to ensure people have a safe place to stay and are helped into long term accommodation.

2.1.4 National Drug Strategy 2021

The National Drugs Strategy introduced a 10-year plan to address the key priorities to:

- Break drug supply chains
- Deliver a world class treatment and recovery system
- Reduce the demand for recreational drugs

A key element of the ‘recovery’ objective is ‘improved access to accommodation’ with national research undertaken in 2020 finding ‘at least 43% of respondents who had a drug need developed their dependency prior to first sleeping rough, and 17% afterwards’.

This is reflected locally, with research carried out to inform this report finding that of the most severely disadvantaged people involved with multiple services (including homelessness) drug use was a presenting need in 85% of cases, with alcohol prevalent in 30%. Although it should be noted that the age range of the study cohort was predominantly over 25 years, with 12.3% being aged 24 years or less

2.2 Local Context

The service aligns to the corporate priorities of Barnsley’s ‘Our Council Plan 2021-2024⁴’ and ambitions of the ‘Barnsley 2030 Strategy⁵’, with contribution to a number of outcomes being met both directly and indirectly:

- **Healthy Barnsley**
 - People are safe and feel safe.
 - People live independently, with good physical and mental health for as long as possible.
 - Reduced inequalities in health and income across the borough.
- **Learning Barnsley**
 - People have the opportunities for lifelong learning and developing new skills including access to apprenticeships.
 - People have access to early help and support.
- **Growing Barnsley**
 - People are supported to have safe, warm, sustainable homes.

³ <https://www.gov.uk/government/news/jenrick-launches-266-million-housing-fund-for-vulnerable-people>

⁴ <https://www.barnsley.gov.uk/media/18156/council-plan.pdf>

⁵ <https://www.barnsley.gov.uk/services/our-council/barnsley-2030/barnsley-2030-strategy/>

The corporate priorities and ambitions are underpinned by a number of additional strategies and plans, to which the service also aligns.

The multiple needs service will deliver the strategic priorities set by the **Safer Barnsley Partnership**, which are informed by the Harm Reduction Subgroup (formerly the **Protecting Vulnerable People Sub-Group**) who have committed to:

- Develop a new service specification for supported housing for individuals experiencing multiple disadvantages, aligned to the homelessness accommodation provision to reduce duplication and create a cohesive pathway.
- Commission appropriate supported housing to support those experiencing Multiple Disadvantage, with the multiple needs service contributing to these commitments and the following key outcomes of the group:
 - Reduction in the number of people experiencing Severe Multiple Disadvantage without coordinated and appropriate support.
 - Reduction in the number of people experiencing Severe Multiple Disadvantage presenting to crisis services.

The service also aligns to the priorities and objectives of **Barnsley's Housing and Support Commissioning Plan 2019-2024**:⁶

- Maximise homeless prevention options, activities and outcomes, through early identification of problems, the provision of high-quality advice and assistance, increased homeless prevention and accommodation options.
- Strategic review of multiple and complex needs to ensure commissioned services continue to provide innovative solutions to facilitate sustained independence.
- To develop and support the provision of good quality housing and support services that meet individual needs.
- To promote and create stability for individuals and communities by ensuring the support available enables self-sufficiency, independence and integration into communities.
- To be responsive to fluctuating need though demand-led commissioning.

Although the 'Everyone In' initiative changed the direction of some homelessness services, the recommissioned multiple needs service will align to continuing priorities of the 'Homelessness Prevention and Rough Sleeping Strategy 2018-2023'⁷

- To maximise homeless prevention options, activities and outcomes.
- Supporting people with complex needs.
- Reduce the demand for temporary accommodation and eliminate the use of B&B's.
- Protect and increase local housing options (promote active move on from supported housing).
- Maximise and maintain partnership working.

A strategic objective of the 'Housing Strategy 2014-2033'⁸ is to support younger, older and vulnerable people to live independently, with this being achieved by:

- Improving the range and options of supported accommodation.
- Providing more choice and options to help vulnerable people live independently in their homes.

⁶ <https://www.barnsley.gov.uk/media/16193/housing-and-support-commissioning-plan-2019-to-2024.pdf>

⁷ <https://www.barnsley.gov.uk/media/17956/homeless-prevention-and-rough-sleeping-strategy.pdf>

⁸ <https://www.barnsley.gov.uk/media/15587/housing-strategy-2014-2033.pdf>

- Supporting young people to access housing and live independently.
- Remodelling accommodation and support for young people and developing robust pathways.
- Preventing and reducing homelessness through early intervention.

3. Aims of the Multiple Needs Service

3.1 Service Aims

The service aims to:

- Enable young people aged 16-24 to address conditions that result in them living often chaotic lives and subsequently having multiple and complex support needs.
- Prevent 16 – 24 years old being placed in inappropriate housing, including out of area placements and prevent anyone being placed in bed and breakfast.
- Enable young people aged 16-24 to develop life skills which support them moving on from specialist support services and living independent lives.
- Improve the health and wider wellbeing of those accessing the service, and reduce the number of people experiencing repeat homelessness, relapse and an escalation of negative behaviour.

3.2 Strategic Objectives

At a strategic level, the objectives of the service are:

- Early help and intervention; reducing contact with crisis services such as A&E and the criminal justice system.
- Increased homelessness prevention and a reduction in rough sleeping.
- Improved housing options available to the most vulnerable.
- A cohesive supported housing pathway aligned to the homelessness accommodation provision.
- Improved employability of those most vulnerable.
- Prevent nuisance anti-social behaviour.
- Reduce health inequalities.
- To support effective coordinated service delivery with partnerships in Barnsley.

3.3 Service Objectives

The service supports individuals to:

- Address problematic behaviour that has contributed to multiple needs such as abuse, traumatic events and homelessness.
- Access and participate in appropriate treatment/medical provision.
- Access a range of support services to increase health and wider wellbeing.
- Comply with statutory orders.
- Access and participate in education and training.
- Participate in work like activities and volunteering.
- Reduce/cease offending behaviour
- Become 'tenancy ready'.
- Become 'work ready'.

4. Evidence Base and Demand

The research commissioned to examine the level of need and demand from individuals with multiple support needs included an analysis of local demography, a detailed analysis of those individuals who were the most prevalent users of multiple local services and in-depth conversations with those with lived experience. The findings of this research have then been used as a basis for recommendations for the future service structure. Key findings, alongside further collated data, are set out in this section; however, the full report can be accessed via this icon:



4.1 Key indicators of evidence to support a commission:

- a) An association between severe and multiple disadvantage and homelessness, offending, substance misuse, mental health, domestic violence and poverty.
- b) 495 homeless presentations of 16–24-year-olds in the last 13-month period with 67 of these being 16/17 years old.
- c) 421 primary and secondary school aged children known to have presented with mental health support needs in the last 6 months.
- d) 325 presentations of 18–24-year-olds with substance misuse issues between 2017 and the first 6 months of 2021 with 58.8% of these identified as also having a mental health need.
- e) 366 young people aged 10-17 presenting with substance misuse issues over the last 4 years.
- f) 674 presentations of individuals aged 16-25, experiencing domestic abuse in 2021/2022.
- g) 15 under the age of 15 presenting with domestic abuse support needs.
- h) 429 young people under the age of 20 involved with the Youth Justice Service in 2021/2022.
- i) 354 looked after children at the time of writing (May 2022), with concern for the emotional wellbeing of 38.5% of these children.
- j) Barnsley 38th most deprived local authority of the 317 in England.
- k) Current service has a 95-100% occupancy rate.
- l) Significant additional needs recorded in service users accessing the current service: Between April 21 and March 22: (Source: Centrepont)
 - 15% had problematic alcohol use
 - 21% has problematic drug misuse
 - 63% were experiencing mental health issues
 - 86% had an offending background, and were known to judicial services
- m) Throughput rates of current service (exits from service) between 113% and 206% indicating progressive movement through accommodation/support pathway.
- n) Planned exits from current service exceed 75% target on average over the last 3 years.
- o) Outcomes of planned exits include resettlement with family/friends, securing a Barnsley Homes property/other social housing provision.
- p) Gradual controlled progression into independent living, supported by the current service, reduces the risk of repeat homelessness presentations, with an average of 39.7 service users in receipt of floating support at any one time to support the transition to independent living.

4.2 Substance misuse and multiple needs

The research worked in conjunction with related services to compile a 'By Name List of those people experiencing severe disadvantage who were known to multiple services at the same time. These were all experiencing or were at risk of homelessness so were considered likely to enter or require the multiple needs service provision.

The research found that amongst those aged 25 years and over, the majority were experiencing long term entrenched substance use, linked to cycles of repeat homelessness and rough sleeping due to failure to engage productively with treatment due to wider support needs. There was also more evidence of related physical health needs in this group, including respiratory and circulatory problems, blood borne infections and issues related to prolonged intravenous drug use.

In the younger 16–24-year-olds age range, substance use was often at a much earlier stage and linked to recreational or occasional use. Support required to manage substance use in this cohort also differed proportionately, being linked to safe usage largely via ‘brief interventions’.

In recognition of these findings, a revised approach to supporting the over 25’s cohort was recommended and approved. This has resulted in the merger of the existing multiple needs provision for this age group with the substance misuse treatment service, to deliver a comprehensive and cohesive support offer which encompasses all elements of the treatment provision with the accommodation and support expertise of the multiple needs service. On this basis the multiple needs provision for younger clients aged 16 to 24 years has been recommended for retention and recommission to best reflect the support needs of this cohort.

4.3 Local demographic position

The Lankelly Chase *Hard Edges* report found “an association between SMD [severe and multiple disadvantage, defined in this study as homelessness, offending and substance use] prevalence rates and areas of the country where poverty tends to be concentrated” (p.25)⁹.

A more recent Lankelly Chase study¹⁰ expanded the need domains to further include domestic violence and mental-ill health within the scope of defining severe multiple disadvantage.

Wider research¹¹ indicates a growing number of young people experiencing multiple and complex needs which put their ‘wellbeing and optimal integration into society at stake’. The research suggested high societal costs as a result of ‘extensive use of health and social care and justice systems’. ‘Potential compromise for academic and work outcomes’ are also cited as additional impacts of multiple and complex needs in young people.

The research highlights a need for a holistic approach to addressing the complex needs of this cohort to address both the vulnerabilities of young people and their families and the factors that aggravate the complexities of their needs. Although this research is not based on the local population it can be taken as a universal interpretation of the younger cohort experiencing multiple and complex needs and refers to similar issues experienced by young people within Barnsley.

4.3.1 Deprivation

Overall, Barnsley experiences higher levels of deprivation, with average weekly earnings at £82 less than the English average and £28 less than the regional average. It is the 43rd most deprived borough (of 317 English boroughs) in relation to income¹². Strongly associated with this incidence of poverty, Barnsley’s Joint Strategic Needs Assessment reports lower educational attainment, higher unemployment, and a higher incidence of smoking, poor diet, and inactivity in the borough, compared to national averages. This suggests higher levels of social exclusion, and of complexity in relation to physical and mental health needs¹³. These issues are likely to be more prevalent in young people who are impacted by issues outlined below, severely impacting the life chances of this younger cohort.

⁹ Bramley, G. & Fitzpatrick, S. (2015) *Hard Edges: Mapping Severe and Multiple Disadvantage: England*, Lankelly Chase

¹⁰ Lankelly Chase *Hard Edges Scotland* (2019) <https://lankellychase.org.uk/publication/hard-edges-scotland/>

¹¹ Van Den Steene et al. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7709935/#bib1>

¹² 2019 Borough Profile for Barnsley, available at: <https://www.barnsley.gov.uk/media/17269/our-borough-profile-20190724.pdf>

¹³ Barnsley Joint Strategic Needs Assessment, Part of ‘Feel Good Barnsley’ – Health and Wellbeing Strategy 2016-2020] <https://www.barnsley.gov.uk/services/our-council/research-data-and-statistics/joint-strategic-needs-assessment-jsna/jsna-summary/>

4.3.2 Young people

English Indices of Deprivation 2019 suggest additional risk factors relating to the life chances of young people in Barnsley, for example:

- Barnsley is ranked as 15th on the scale of deprivation for education, skills and training, and 42nd for income deprivation affecting children (where 1 is the most deprived and 317 is the least deprived)¹⁴
- There is a higher percentage of children excluded from Barnsley schools (36%) compared to national and regional averages.¹⁵
- In 2020/21, there were concerns about the emotional wellbeing of 38.5% of Barnsley's Looked After Children slightly above national averages¹⁶.
- In 2019/20 the rate of children in 'absolute' low-income families and 'relative' low-income families is above the national average.¹⁷
- In 2020 the figure for 16/17-year-olds not in education, employment or training was slightly higher than the national average.¹⁸
- Both under 18 and under 16 conception rates were above regional and national averages in 2020.¹⁹ Teenage mothers are more likely to experience poor mental health, more likely to be 'Not in Employment Education or Training' (NEET) and more likely to live in poverty and deprivation. Teenage fathers are also vulnerable to poorer outcomes, with young fathers being twice as likely to be unemployed at age 30 than men who were not young fathers.²⁰

4.3.3 Homelessness

Between April 2021 and May 2022 495 individuals aged 16-24 years presented as homeless / at risk of homelessness to the councils Housing Options Service, many of whom had additional support needs²¹, equating to 9 individual presentations per week. During the same period, the accommodation element of the Multiple Needs Service has on average one vacancy per week, clearly highlighting the demand pressures on the current service provision.

Of the cohort presenting as homeless, 69 individuals were aged under 18, with:

- 48 – being 17 years old
- 19 – being 16 years old
- 2 – being aged 15 years old

While under 18's account for a relatively small proportion of overall of homeless presentations by under 25's, they typically have less experience of independent living, and fewer existing life skills, requiring more intensive work to prepare them for mainstream housing. Short term housing solutions are also subject to greater restrictions, with the use of B&B for this age group prohibited by the Homelessness Code of Guidance²²

¹⁴ Oxford Consultants for Social Inclusion (OCSI) and Deprivation.org (2019) *English Indices of Deprivation 2019*. London: Ministry of Housing, Communities & local Government. Available at: <https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019>

¹⁵ National Statistics (2021) *Academic Year 2018/19 Permanent and fixed-period exclusions in England (by local authority district)*. London: The Stationery Office. Available at: <https://explore-education-statistics.service.gov.uk/find-statistics/permanent-and-fixed-period-exclusions-in-england>

¹⁶ Public Health Outcomes Framework, indicator C12

¹⁷ Public Health Outcomes Framework, indicator B01b

¹⁸ Public Health Outcomes Framework, indicator B05

¹⁹ Public Health Outcomes Framework, indicator C02a and C02b

²⁰ [A Framework for supporting teenage mothers and fathers](#)

²¹ Source: BMBC Housing Options

²² <https://www.gov.uk/guidance/homelessness-code-of-guidance-for-local-authorities/chapter-17-suitability-of-accommodation>

Furthermore, as individuals under the age of 18 cannot legally hold a tenancy without a guarantor, they are significantly more difficult to re-house, often remaining in supported accommodation until after their 18th birthday, further reducing the availability of accommodation for new referrals.

Currently, all ages are mixed in the accommodation element of the Multiple Needs Service, however, in recognition of the volume of under-18 presenting for support, alongside the unique needs experienced by this cohort, an option to create a dedicated provision for this age group is included in the recommendations of this report.

4.3.4 Mental Health

There is evidence of above average prevalence of mental health issues within the local population:

- The Public Health Outcomes Framework data tool shows a 'significant increase' in hospital attendances resulting from intentional self-harm for all age groups²³.
- Barnsley MBC Housing and Support Commissioning Plan 2019 – 2024 predicts an increased number of working age residents experiencing common mental health problems and psychiatric disorders over the next ten years.
- In 2020/21 hospital admissions for mental health conditions for those below 18 years were higher than the regional average.²⁴
- Nationally the number of young people with an eating disorder awaiting treatment was 4 times higher than in 2021 with significant increases also seen locally.²⁵
- The % of school pupils with social, emotional and mental health needs in Barnsley is higher than both the regional and national average.²⁶
- National data indicates a significant deterioration in younger people's mental health²⁷ which can be expected to be reflected locally due to the covid-19 pandemic.
- Local data highlights a consistent number of primary and secondary school aged children with mental health support needs, with over 400 known cases in schools in the last 6 months with an average of 70 children in each age range from 11 and under through to 16+.²⁸

4.3.5 Substance use

There is evidence to suggest that problematic drug and alcohol use is above average and on the increase in Barnsley.

- The 2021 Joint Strategic Needs Assessment found that young women (under 18) have higher than average rates of alcohol-related hospital admissions in Barnsley (67.6 compared to a national rate of 25.9 per 100,000 in the population).
- Rates for hospital admissions due to substance misuse for young people 15-24 years in the period 2018/19-2020/21 were significantly higher than regional and national averages.²⁹
- Local data³⁰ highlights over 350 10–17-year-olds known to have substance misuse issues in Barnsley over the last 4 years, with an acknowledgement of the likelihood of higher numbers in this cohort that currently don't present. This data is indicative of future service demands.

Local data also suggests high levels of substance misuse within the 18–24-year age group, with 325 presentations from 2017 to the first 6-month period of 2021/22, 58.8% (191) of these young people

²³ [Fingertips Public Health Profiles](#)

²⁴ [Fingertips Public Health Profiles Data](#)

²⁵ Source: CAMHS data via BMBC Business Intelligence Unit

²⁶ [Fingertips Public Health Profiles Data](#)

²⁷ [NHS Mental Health of CYP in England 2021 Survey](#)

²⁸ Source: Barnsley Schools Mental Health Support Team

²⁹ [Fingertips Public Health Profiles data](#)

³⁰ Source: BMBC Children's Services

were also identified as having a mental health need. There were more presentations in the first 6 months of 2021/2022 than the whole of 2019/2020. Anecdotal information also suggests a further significant number of young people using drugs recreationally particularly in the night-time economy.³¹

National data³² suggests vulnerabilities of young people experiencing substance misuse include both mental health issues and self-harming behaviour, with local levels of hospital admissions for mental health conditions in the younger cohort higher than regional averages, and local levels of hospital attendances from intentional self-harm for younger people at very high levels compared with regional and national averages (as outlined in section 4.1.4).

The same data also suggests young people presenting with substance misuse issues also present with additional vulnerabilities including not being in education, employment or training and/or experiences of domestic abuse. Data (outlined in sections 4.1.2 and 4.1.5 respectively), indicates high incidence locally in both of these areas.

4.3.6 Domestic abuse

According to the most recent JSNA data, Barnsley's rate of domestic abuse is steadily increasing and was higher than national and regional figures in 2017/2018. The most recent quarterly Police and Crime Plan Performance Report³³, suggests this reflects a wider trend across South Yorkshire.

Where women experiencing domestic abuse have coexisting challenges with substance use, offending and/or mental health, the Police confirmed that there is a current gap in housing and support provision suitable for them.

Local data highlights a significant number of young people experiencing domestic abuse and/or sexual violence over the last two years, with 674 individuals between the ages of 16-25 presenting with such issues in 2021/2022 alone. The prevalence is higher within the 21-25 years category (452) but there is still a significant proportion of those aged 16-20 (222) experiencing such issues. Data also suggests a small proportion of individuals (15) under the age of 15 have domestic violence support needs.³⁴

4.3.7 Offending

Published statistics suggest that rates of offending may be somewhat higher in Barnsley than nationally. For example, in the English Indices of Deprivation, Barnsley is ranked as the 31st most deprived borough in England in relation to Crime³⁵.

Figures up to 2018 suggest that around 60 young people in Barnsley enter the justice system for the first time in an average year; although the rate tends to be higher than national averages, it suggests a positive trend³⁶ and this is borne out in the recent BMBC Corporate Plan, which states that the number fell to 14 during 2020/21.

³¹ Source: Barnsley Recovery Steps

³² [Gov.uk - Young People's Substance Misuse Treatment Statistics](https://www.gov.uk/government/statistics/young-people-substance-misuse-treatment-statistics)

³³ <https://southyorkshire-pcc.gov.uk/app/uploads/2020/06/Q4-1920-report-final.pdf>

³⁴ Source: IDAS

³⁵ Oxford Consultants for Social Inclusion (OCSI) and Deprivation.org (2019) *English Indices of Deprivation 2019*. London: Ministry of Housing, Communities & local Government. Available at: <https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019>

³⁶ Public Health Outcomes Framework, indicator B04

Local data indicates 429 young people under the age of 20 were involved with the Youth Justice service between April 2021 and April 2022. The higher numbers were seen specifically in ages between 14-17, with the highest number of repeat offenders also within this age bracket.³⁷

Research suggests children and young people in contact with the youth justice system are more likely to have mental health problems than those who are not and are more likely to have more than one mental health problem alongside a range of other challenges.³⁸ Risk factors, associated with youth offending, that are prevalent in Barnsley include substance misuse, higher unemployment and poverty. National data³⁹ also suggests the youth justice system was the second largest source of referral into substance misuse services for young people, demonstrating the link between substance misuse and offending behaviours, with section 4.1.5 suggesting high levels of substance misuse in the 18-24 age bracket.

4.3.8 Looked After Children

National data⁴⁰ cites 'looked after' children as being vulnerable to substance misuse, which brings along additional vulnerabilities relating to mental health, self-harm, and domestic abuse, (as outlined in section 4.1.5). Further research⁴¹ corroborates this data, highlighting the vulnerabilities of this cohort of young people, including experiences of abuse or neglect which leave children with complex emotional and mental health needs, which in turn can increase their vulnerability to further abuse. The same research also highlights leaving the care system as a particularly challenging time for these young people, highlighting a necessity for appropriate support and accommodation plans to be in place to prevent a cliff edge at 18.

The current number of looked after children in Barnsley stands at 354⁴², with additional data⁴³ highlighting the percentage of looked after children whose emotional wellbeing is a cause for concern being higher than the national average.

4.3.9 16/17-year-olds

A number of 16/17 year olds presented to the Housing Options Team as homeless/at risk of homelessness with a proportion of these being referred into the current 16-24 years' multiple needs service in the last 12-month period. The predominant reasons for this age group being referred to the service were relationships breaking down with parent/carers and care leavers exiting the care system, with a combination of needs including mental health, substance misuse, offending and learning disability. Local data⁴⁴ highlights an estimated 45 16/17-year-old school children presenting with mental health needs and national data⁴⁵ suggests the highest proportion of young people accessing substance misuse services tend to be within the 16/17-year-old range.

The commissioned research suggests the congregate accommodation available in the current service may not be the most appropriate option for this age group, with a smaller setting potentially being more conducive to their specific needs.

³⁷ Source: BMBC Youth Justice Service

³⁸https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/255237/2901304_CMO_complete_low_res_accessible.pdf

³⁹ [Gov.uk - Young People's Substance Misuse Treatment Statistics](#)

⁴⁰ [Gov.uk - Young People's Substance Misuse Treatment Statistics](#)

⁴¹ <https://learning.nspcc.org.uk/children-and-families-at-risk/looked-after-children#article-top>

⁴² Source: BMBC Children in Care Service

⁴³ [Fingertips Public Health Profiles](#)

⁴⁴ Source: Barnsley Schools Mental Health Support Team.

⁴⁵ [Gov.uk - Young People's Substance Misuse Treatment Statistics](#)

4.4 People with lived experience

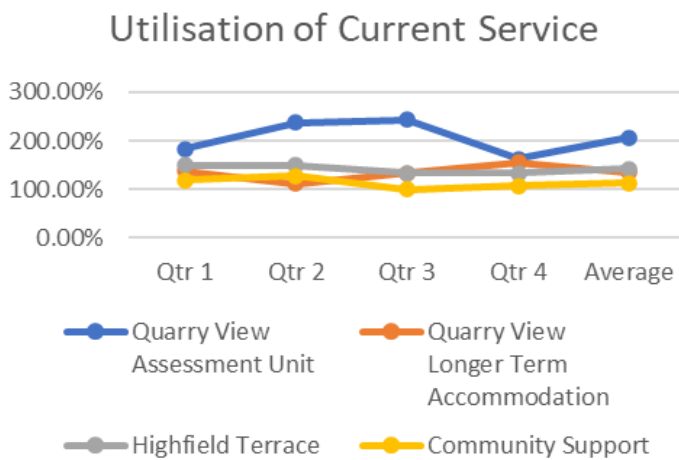
Discussions were held with people with lived experience, and the following observations and conclusions drawn from their experiences of accessing multiple services:

- Importance of specialist young-persons accommodation.
- Sexual exploitation, domestic abuse, coercion, etc - in relationships, on streets, in hostel settings is a common theme for women, noting some younger men may be vulnerable to exploitation.
- Shared settings can be daunting and stressful for some; but others meet friends for life in congregate supported accommodation, and some are adamant they would not want to live alone.
- The role of family and non-service contacts in triggering and sustaining change recognised - through mediation, Family Group Conferencing, peer advocates etc.
- Bereavement, trauma, loss and abuse are common themes. It is clear that trauma and exclusion often escalate the longer people remain in housing instability.
- The ongoing presence of primary health care services - at times these may be the only constant when people are cycling through various insecure housing situations.

The demographic findings show factors contributing to the prevalence of complex needs within the 16-24 age cohort to be at higher levels within the borough. Evidence also highlights children and young people under 16 are experiencing issues that are likely to evolve into multiple and complex needs as they progress into the 16-24 age bracket, including mental health issues, domestic violence, substance misuse, offending behaviours and vulnerabilities associated with looked after children.

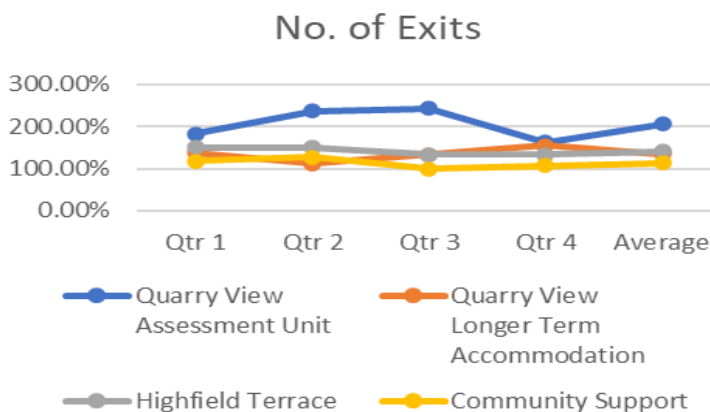
5. Current Service Performance

5.1. Service Utilisation and Throughput



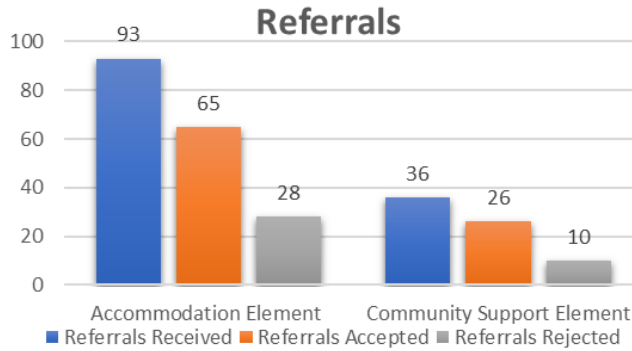
Average utilisation rates within the all elements of the service have been consistently high over the last 12-months, averaging between 95%-100%, demonstrating a clear and ongoing demand for the provision.

Each element of the service reports regular exits, although many of these represent service users 'stepping down' from the initial accommodation into longer term units with lower levels of support as young people gain life skills and become more independent.



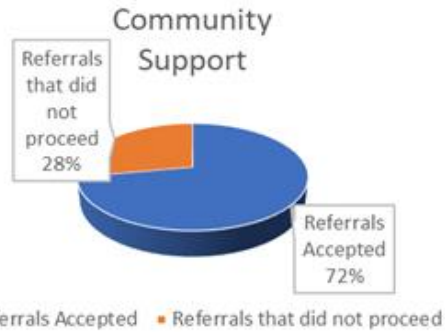
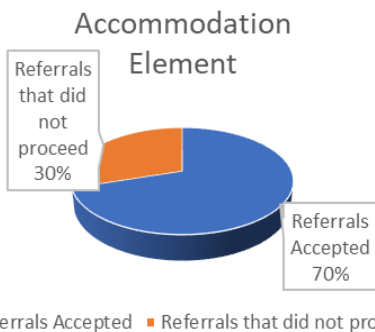
This illustrates the benefit of delivering a range of provisions within the service to enable individuals to move progressively through their recovery journey into more appropriate accommodation as needs decrease, as a result of support provided by the service.

5.2 Referrals into the Service



A consistently high level of referrals has been made into the service, with a significant proportion being accepted demonstrating a clear evidenced need for the service. The nature and complexities of this client cohort account for reasons that some referrals do not proceed (outlined below) and does not reflect the capabilities of the service. (*referrals data provided by current service provider, Centrepoint).

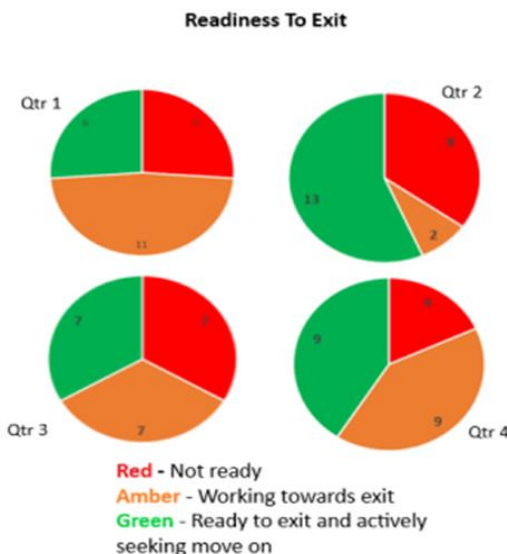
Reasons referrals did not proceed in the accommodation element include:



- Individual did not attend assessment.
- Offer of support was declined.
- Individual not suitable for client group mix at time.
- Individual offered alternative accommodation.
- 1 client had needs that were too high for the service to address.
- Individuals not engaging with assessment process in community support element, (agencies make referrals but individuals do not want support offered).

5.3 Exits from the Service

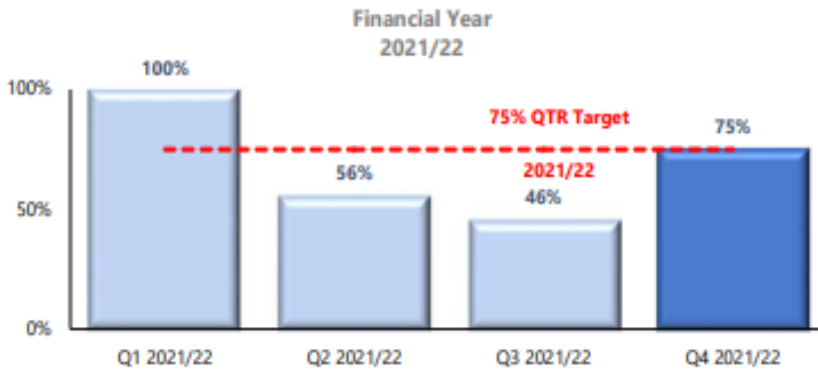
5.3.1 Readiness to Exit



The service rates the readiness to exit of service users in the accommodation elements on a quarterly basis to identify 'bed blocking'. This data is fed into the Safer Barnsley Partnership via the Protecting Vulnerable People Sub-Group to highlight onward accommodation needs, and barriers to move on. The data identifies a volume of service users that are ready to exit but who cannot secure suitable onward accommodation, highlighting the difficulty young people face in accessing accommodation either in the social or private rented sectors. Within those service users marked as 'red', who are not yet ready to exit, the service provider confirms that younger individuals are overrepresented in this cohort, typically presenting with limited life skills, supporting the need for age specific provision for 16/17-year-olds, ensuring they are placed within an environment conducive to their needs.



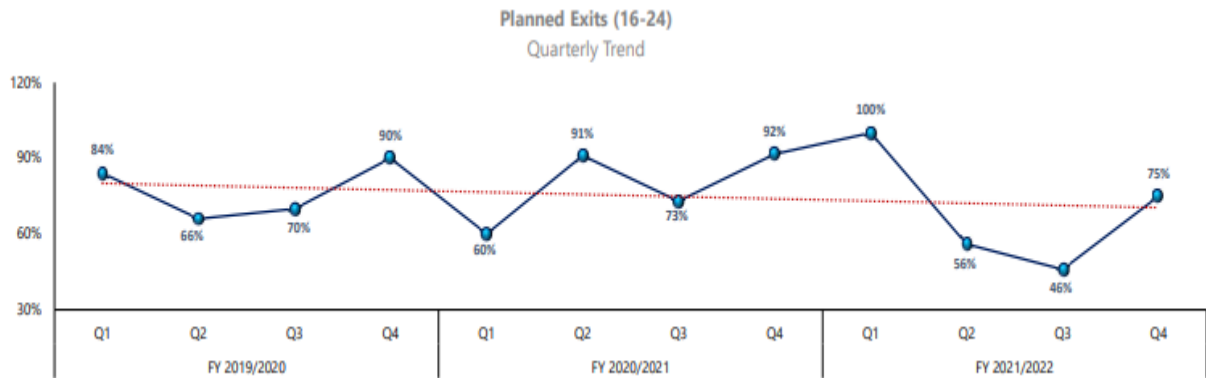
5.3.2 Nature of exits from the service



The service monitors all exits from the service, with internal transfers, and moves to sustainable onward accommodation being recorded as ‘planned moves’.

The data is reported to the Safer Barnsley Partnership, with a target of 75% set for quarterly planned moves.

Between April 2021 and March 2022 the average rates of planned moves from the service were 69.25%. exits. The below shows a positive overall trend in planned exits over the last 3 years, with an average rate of 75.25%, exceeding the target 75% for this measure.



The most common over the last 12-month period was resettlement with family or friends, demonstrating the essential function of the service in facilitating the re-establishment of familial relationships, with this being a highly positive outcome for this younger cohort when it is safe to do so. The service provides a dedicated mediation provision, funded by a corporate sponsor (as described at 6.2).

Internal transfers accounted for the second most common planned move with a smaller number of service users securing tenancies with Berneslai homes or other social or private landlords. Again demonstrating the benefit of providing options to facilitate a controlled progression into sustainable independent living.

6. Added value of current service

6.1 Social Value

The service generates Social Value through the achievement of National TOMS (Themes, Outcomes & Measures⁴⁶) ‘NT1 Jobs: Promote Local Skills and Employment – Growing Barnsley’, through the employment during 2021-22 of 17 local staff, creating a net Social Value of £476,000 (based on the proxy value of £28k / post)

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6.2 Corporate investment

Centrepoint has a dedicated fundraising division to fund additional activity beyond that met by contracted funds. Locally, specific donations have been provided by the online retailer ASOS, and



supermarket WM Morrisons to support the local service.

Within the lifetime of the existing service contact this has funded the capital purchase and operation of a dedicated 'learning hub', which was officially opened by their Royal Highnesses the Duke and Duchess of Cambridge in 2018.

A 0.5 FTE Education and Training Officer post is also funded, which has supported 30 young people to achieve an accredited qualification.

Corporate donations also funds the following provision within the local service:

- Clinical Psychologist - who develops and delivers staff training in creating a psychologically informed environment (PIE), facilities reflective practice and undertakes coproduction with service users.
- Healthy Relationships Advisor – providing therapeutic mediation / repatriation to help strengthen relationships with positive people, including family members and sexual partners. To date 317 sessions have been delivered, and 44 individual young people supported during 2021/22.
- Psychotherapist – who provides support relating to trauma, emotional and behavioural needs, bereavement, low self-esteem, relationships, mood disorders, self-harm, suicide prevention. During 2021-22 19 young people were supported with long term counselling, each receiving up to 24 sessions. An additional 15 young people were supported by text while on waiting lists for NHS clinical services.
- Volunteering Officer – to create and manage volunteering opportunities for young people and the wider community for the benefit of the service.

7. Wider impact of Multiple Needs

As highlighted in the commissioned research and the wider Lankelly Chase research and confirmed by the 'Making Every Adult Matter' coalition, services often fail to provide appropriate support for people experiencing multiple disadvantage, with most designed to deal with one issue at a time, rather than addressing all needs holistically, leading to this cohort being more likely to access emergency and crisis, rather than planned, services. Accessing services in this manner is costly and at a time where emergency services are already pushed to crisis points themselves this can be significantly detrimental to the public purse. The financial cost of severe multiple disadvantage is conservatively estimated at £10.1 billion per year nationally across just three needs domains: homelessness, substance misuse and offending. This figure is an estimate for the wider, all age cohort experiencing multiple disadvantage.

There are also significant social costs for individuals facing multiple disadvantage, and for wider society.

- Quality of life for those facing SMD.

- Negative impacts on children who live with, have contact with or are estranged from people facing SMD.
- Negative impacts on partners and other family members.
- Externalities impacting on wider society, relating to the offending behaviours and other aspects of social harm which may accompany SMD.⁴⁷

7.1 Potential Impact of service loss

The local demographic and evidence base data, combined with consideration of the financial and wider effects of severe multiple disadvantage for individuals, families and wider society (outlined above), and the research recommendations outlined in section 6.2.2, clearly demonstrate the importance of a dedicated service for this cohort to support individuals with multiple and complex needs aged 16-24 into sustainable independent living, including age-specific provision for 16–17-year-olds.

Such a service demonstrates its significant contribution to the reduction of the financial pressures and negative effects on individuals, family and wider society related to the behaviours and needs of this cohort, alongside supporting individuals to contribute to society and ultimately living fulfilled lives.

This service also serves to halt the progression of younger individuals into the entrenched behaviours of the older cohort, again negating the risk of repeat homelessness and the exacerbation of complex needs when this younger cohort reach the age bracket for the 25+ service, in effect, ‘catching’ and supporting younger people early to ensure their needs do not progress further.

If this service were to close, the burden on the older multiple needs service within the substance misuse treatment provision would intensify significantly as the younger cohort would eventually present with highly intensified needs that could have been addressed earlier. As the younger cohort would be left to progress through their chaotic lives without suitable intervention at a pivotal early stage, their needs would become such that the probability of their issues and behaviours becoming more entrenched to the point at which it is very difficult to overcome, without the need for further intense specialist support, if at all, is extremely high. In effect the closure of the younger persons service would realistically just move the intensified pressure onto the older persons’ service.

Additionally, a lack of a commissioned service for the younger cohort would lead to a lack of control over the quality and performance of single services who would likely revert back into ‘silo working’, which local research has highlighted as being significantly detrimental to the life chances of young people.

7.2 Summary

Cessation of a dedicated younger persons’ service would ultimately result in a significant step backwards in the pursuit of supporting this extremely vulnerable cohort into independent living and out of their vulnerabilities and associated behaviours. Significant financial and operational pressures would be seen in several areas, including but not limited to, housing, health, 25+ multiple needs service, social care and crisis services. Pressures which would be unsustainable due to those that services are already under. Ultimately a devastating effect would be witnessed within wider services and most importantly for the young people and their families, with further effects also being seen in wider society. The young people experiencing multiple and complex needs today, needs that could be addressed and reduced or eliminated at an earlier stage, would become the older multiple and

⁴⁷ Bramley, G. & Fitzpatrick, S. (2015) Hard Edges: Mapping Severe and Multiple Disadvantage: England, Lankelly Chase

complex needs cohort of tomorrow, but with much more intense support needs and entrenched behaviours, which would then be significantly harder and more costly to address.

8. Research recommendations and proposals

The commissioned research highlighted a number of opportunities to improve local service delivery, with the following already implemented:

Intensive Housing Led Support Provision

A cohort of individuals in Barnsley were identified where the current services and systems were not effective; with a recommendation for the development of a dedicated service to fill the identified gap for those with very complex support needs. A new Intensive Housing Led Support service has now been established within the Housing Options Service, with full details attached at Appendix A. As this service can only support those aged 18 years and over, those aged 16/17 with complex and multiple needs will not be able to access this provision, and this gap in provision is reflected in the recommended option.

Entrenched substance use amongst older cohort

As described in 4.2, a significant issue of entrenched substance misuse linked to repeat homelessness was identified. To create a more cohesive approach to support this group, the existing Multiple Needs service for over 25's has been merged with the existing Substance Misuse Treatment service.

Female only accommodation

A need for women only spaces was identified as a priority. An existing accommodation unit within the multiple needs 25+ / substance misuse service has been identified as being suitable for this purpose, and its configuration will align to the principles of the Domestic Abuse Act 2021⁴⁸, and the identification of high levels of domestic abuse amongst those featured in the wider 'by-name' list.

The remainder are set out below, and where appropriate are included in the recommended model for the future commission.

8.1 Proposal for future service model

To reflect the remaining research recommendations and the wider findings of this report, it is recommended that the ***Multiple Needs Service for individuals aged 16-24 years be recommissioned, with the contract being offered via a competitive process to recommence on 1st April 2023***, using a specification containing the following:

8.1.2 Accommodation

Highfield Terrace site – this unit be ***designated as a dedicated accommodation facility for 16/17-year-olds***.

The site is situated in the town centre and will provide five units of self-contained accommodation which will be complemented by intensive onsite support. Noting that some older service users, including those with additional needs including learning difficulties, may benefit from a smaller environment, it is also proposed that a level of flexibility be included to maximise reach.

The retention of this unit within the existing 16-24 years multiple needs service will ensure there is no 'cliff edge' in support provision at 18, with service users being able to remain in the longer-term accommodation provided by the service. Access to this unit will be via the panel within Housing

⁴⁸ <https://www.legislation.gov.uk/ukpga/2021/17/contents/enacted>

Options Service, with joint assessments being undertaken with Children's Services in accordance with the existing protocol to ensure alignment to relevant legislation.

Quarry View site – it is recommended that the *current structure and layout be retained*, with the core unit continuing to provide seven units of *initial 'assessment' accommodation* for those with the highest support needs alongside one *'crash pad' unit to be used for emergency or short-term admissions*. The nine self-contained flats will provide *longer term accommodation to support young people into independent living*.

8.1.3 Floating / Outreach support

It is recommended that the existing *40 units of floating support capacity be retained* and provide support to promote and enable sustainable move on from the accommodation elements of the service.

This will contribute to an improved emphasis on achieving sustainability rather than 'successful exits' from the service and be complemented by a revised approach to performance monitoring, focussing on the individual's journey throughout the service and beyond, and be triangulated with data from the Intensive Housing Led Support Team to identify repeat presentations. This will enable closer evaluation of effectiveness of the service, and allow for reflection on what has, or hasn't worked for service users.

8.1.4 Trauma informed / Holistic Support Provision

It is recommended that the recommissioned service will utilise *a trauma informed approach to support*, delivered in *psychologically informed environment*. A holistic approach to support planning and delivery will be at the core of the service to ensure it provides flexible, appropriate, and proportionate support to break the cycle of multiple needs. Support will be innovative in its use of peers, volunteers, preventative measures, and a service user centred approach to maximise achievement of individual service user outcomes, service outcomes, and an increase in people with multiple needs successfully leading independent lives.

8.1.5 Co-ordinated Support Pathway

Recognising the *joint working protocols with other services are fundamental to the delivery of a coordinated solution* for people with multiple needs, the service will capitalise on these relationships to develop and deliver a consistent provision to service users from referral to exit to reduce duplication and promote a seamless customer experience.

Referrals will continue to be made via the existing panel within the Housing Options Service, with all referrals from 16/17-year-olds being considered in accordance with the joint protocol between Housing Options Service and Children's Social Services.

8.1.5 Recovery Capital and Positive Support Networks

The service will *promote the development of service users 'recovery capital'*:

- Social capital - the resource a person has from their relationships (e.g., family, partners, children, friends, and peers). This includes both support received, and commitment and obligations resulting from relationships.
- Physical capital - such as money and a safe place to live
- Human capital – skills, mental and physical health, and a job; and
- Cultural capital – values, beliefs and attitudes held by the individual.

The Service will effectively identify the recovery capital of the individual, the family, and the community, as all three hold vital assets in an individual's capacity to change their life. The service will emphasise a strength-based approach.

9. Options Appraisal

The future commissioning options available are:

Option 1 – Do nothing

If no action is taken, the existing contract will end 31/03/2023. The impact of service loss is described in detail at 7.1 but in summary will increase pressure on emergency and crisis services and reduce the local authority's ability to discharge its statutory homelessness duty. It will also leave a substantial gap in the homelessness accommodation pathway, leading to a possible increase in homelessness/risk of homelessness for younger people. For these reasons, this option is not recommended.

Option 2 – Recommission the existing service specification

To renew the contract beyond the current end date, the existing service specification would be offered back out to the market, via a competitive procurement process to comply with procurement legislation. This would ensure that a service continues to be provided to people with multiple needs but would fail to deliver the recommendations of the research and may result in some duplication of service delivery with the new Intensive Housing Led Support Team, and prevent the implementation of the recommendations of the commissioned research.

Option 3 – Recommission in accordance with the recommendations set out in Section 9

The service for individuals aged 16-24 years will be offered via a competitive tender using a revised specification, with a support and accommodation offer aligned to the findings of the research reflecting recommendations set out in the business case, with the offer including a dedicated provision for 16/17-year-olds. The new service will commence on 1st April 2023 on an initial 5-year basis, with the option to extend for a further 2 years (in 1-year increments).

10. Financial Implications

Based on the recommendations set out in Sections 6 and 8, the financial implications are as follows:

- The current annual contract value of £499,863.00 be retained, noting that the absence of an inflationary uplift constitutes a material reduction in price over the course of the contract.

Appendix A Intensive Housing Led Support Team – Housing Options Service

Rationale

To capitalise on the momentum of the ‘everybody in’ initiative to reduce rough sleeping during the pandemic, an Intensive Housing Led Support Team is being established within the Barnsley Council Housing Options Service. In addition to providing intensive support, an accommodation provision has been purchased by the Council to create a facility that is wholly managed by the Intensive Housing Led Support Team.

The service is currently in the developmental stage (Spring 2022), with the accommodation element not due to be operational until Summer 2022. Commissioners have liaised closely with the Intensive Housing Led Support Team to clarify the operating model and have considered data relating to the prevalence of substance misuse within the multiple and complex needs cohort. These considerations have led to the proposed recommendations of the future operating model of the 25+ multiple needs service, as detailed in this business case.

Operating model

Intensive Housing Led Support Team - Accommodation – Queens House

Situated on Queens Road close to Barnsley town centre, the accommodation comprises:

- 13 self-contained units of temporary accommodation and one ‘crash pad’ unit,
- Primarily for single occupancy, may accommodate couples where appropriate.
- Age range 18 years and over.
- 24 hours staffed
- Expected length of stay – three months but will be led by service user need
- The provision will aim to reduce rough sleeping, and the use and associated cost of out of area B&B placements for this cohort.

Intensive Housing Led Support Team – Support

The Intensive Housing Led Support Service will be accessed via the existing Housing Options Service, although pathways may be developed to enable direct referrals from partner organisations.

- Multi-agency panel to be established to oversee the work of the service.
- A detailed assessment, risk assessment and support plan will be completed within 6 weeks of a referral acceptance and will utilise a multi-agency approach.
- Flexible support to be provided for as long as is required.
- ‘Active’ phase of support will end when the individual, their keyworker and panel agree sufficient progress has been made.
- Individuals can contact the service at any time to request additional support.
- Sustainability checks will continue for approximately two years following the end of the ‘active support’ phase.
- The multiple needs supported accommodation service will form an integral part of the homelessness accommodation pathway within which the Intensive Housing Led Support Team sits.

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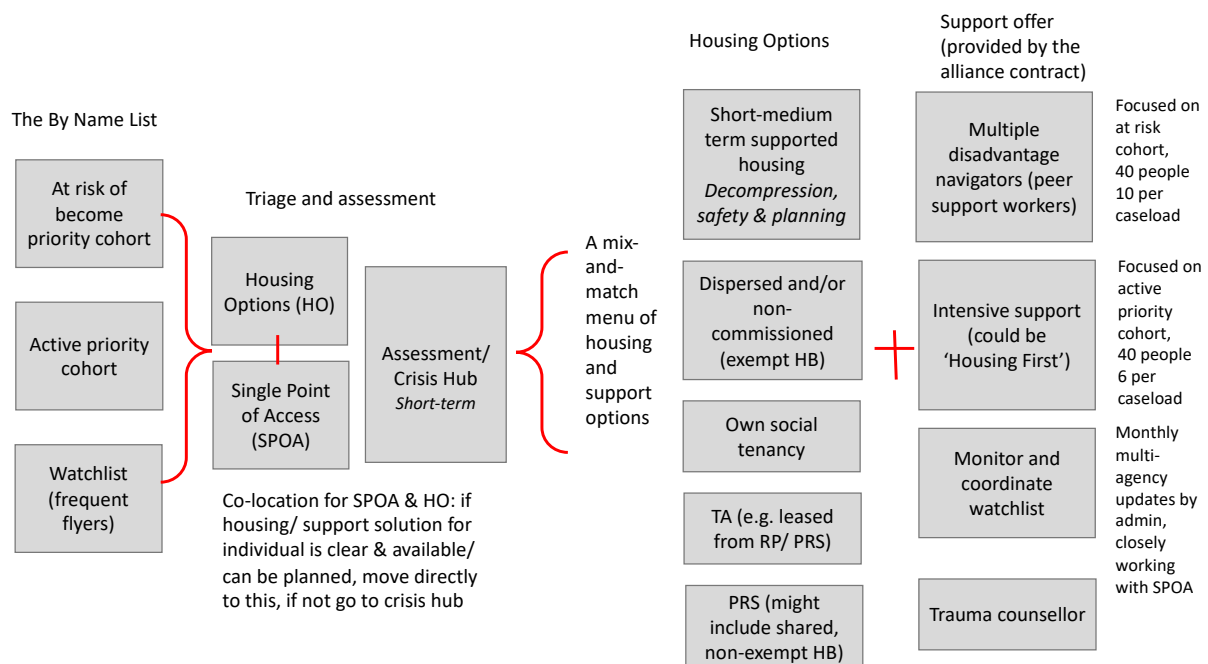
IBA's recommendations for re-commissioning from the findings of the multiple and complex needs review

The different strands of this research have identified some common themes: the lived experience interviews highlighted a number of examples of people experiencing system limitations which adversely affected their outcomes, and the length of time it takes to access the right sort of help. Through the By Name List exercise, the research has identified a substantial cohort of people experiencing severe and multiple disadvantage whose needs are generally not being well-met by the current offer – this may be due, in part, to 'single issue' services, or an inability to engage with the support on offer, periods of relapse which the services are not necessarily designed to flex around. Some have 'burned their bridges'; others have been able to access settled housing, but are now finding this difficult to sustain. The volume, and variety of reasons people fail is itself a powerful illustration of the case for systemic change.

We found evidence that, although the commissioned services are performing well in many ways, they could also be seen to be operating as 'islands' within the wider system. Our recommendation is to bring together some of the examples of good practice we have observed into one coherent offer catering for people with multiple issues and with more psychologically informed services.

Whilst we recognise that the housing and support commission cannot in itself overcome all the barriers which this group face, we nevertheless see some real potential to kickstart a more effective complex needs pathway through the housing and support re-commissioning process.

Fig 1: Illustration of potential pathway:



In order to establish and embed the new pathway, our recommendation is that the current contracts are recommissioned, ideally to an alliance of providers, with a number of clear **principles underlying delivery**:

- This **contract would effectively oversee the By Name List cohort**, working with the priority cohort (we think around 40 people at any given time) and with the at risk/ repeat flyers (probably in the region of a further 110 individuals). This means that the identification of the cohort, the delivery of services to them and the outcomes achieved (e.g. successful engagement, sustainable tenancy, etc) can be co-ordinated and actively monitored with some degree of confidence.
- It provides a commissioned pathway for this cohort, with a **clearly defined case management ethos and model, which retains accountability for the cohort** (whether or not they are staying within a particular building, or whether time limits have been exceeded, etc).
- The 'pathway' refers to movement through (and potentially back and forth between) different models of case management, based on current risks and needs, and does not imply a linear progression through particular buildings or providers. At the moment, service delivery is still buildings-led rather than strictly person-led – the researchers identified examples in which suitability for the offer of a service was led by the question of whether an individual will 'fit into' the available vacancies (and whether the risks can be managed within the support contract attached to that building). A person led approach would ask what someone wanted and then try to provide it. While there is never likely to be an unlimited choice, there are some principles about where power lies, and having the right to make decisions about

issues that affect people. The **proposed model is person-centred in design (as well as in the style of practice)** since the housing and support offer is flexible, and responsive to the needs, resources, preferences and risks of the individual. Responsibility for flexing the offer and finding solutions is 'held' by the case worker, giving permission for actions, rather than an expectation that the worker and the service user must follow a prescribed process.

- Whilst we recommend some ongoing accommodation-based provision, that which remains needs to be **very clear about its function within the wider pathway and this needs to be expressed in strengths-based and trauma-informed terms**. The move from large hostel settings to smaller settings has already taken place; however more could potentially be done – especially in the over 25s service – to increase the therapeutic offer. Even in the most well-run services it is challenging to avoid institutionalised practice. Reframing supported accommodation as a valuable part of any offer will require a review of the language and ethos underpinning current provision. For example, Beevor Court moves from a place where people 'are assessed' to a place of safety, decompression and stabilisation from trauma. Engagement is recognised as being the responsibility of the staff, not how the person conforms, therefore allowing sufficient time for this relationship to be developed forms an important part of any meaningful change. In this environment, people are supported to look at the options for ongoing housing and support which might be available to them, including amongst their own family and friends as well as within services, and plan for their next steps. It is not enough simply to change the terminology, this requires good staffing levels and a clear structure/ culture/ vision and appropriate access to multi-skilled and specialist professionals, and to both therapeutic and peer support. Not everyone will want or be able to access this service, and doing so should not be a requirement to access further housing/ support. The **therapeutic, peer and planned support can be flexibly provided across the whole pathway**, rather than just to those currently in Beevor Court.
- The full range of other (supported) housing options should be considered for individuals, with **careful matching of individuals to places, looking at location/ building/ residents and considering strengths and interests as well as risks and 'problems'**. A floating/ wraparound support offer follows the individual as and where needed, including into non-commissioned or their own tenancy – this follows the person, not the building. In this model, support becomes relational, and more equal. This might then take the form of a walk-and-talk, or a meeting in a coffee shop or accompanying the person to look at an area they might live in/ an appointment/ exploring an interest, etc, moving away from institutions with offices and noticeboards and staff with bunches of keys wherever possible. One of the immediate advantages of this shift is to free up resources which are tied up in 24/7 staffing for smaller congregate settings, where others with needs which are probably at least as high are in non-commissioned supported housing with a weekly welfare check – or even in an out-of-area Bed and Breakfast.
- There is a clear need for **women-only spaces and gender-specific service offers which is not currently being met**. Around 30% of the 'priority cohort' in the BNL

exercise are women and this may be the tip of the iceberg, since women are more likely to remain hidden. We recommend that – as a rule of thumb - around 30% of bedspaces, support offers, etc are designed in such a way that women’s needs can be safely and effectively met (e.g. in shared accommodation which is women-only, in self-contained accommodation, with access to female workers/ peer support workers).

- Access and triage into the pathway will be key. If the pathway can be successfully commissioned from an alliance of providers, we believe it makes sense for a **Single Point of Access (SPOA) function to also be commissioned from that alliance**. This highly skilled post needs to build relationships to support information sharing and **2-way referrals with non-commissioned providers** (who may also be members of the alliance) as well as into commissioned services. The SPOA will work **very closely (possibly including co-location) with the Housing Options team**.

Resources:

Our initial sense is that the commissioned pathway team will (in addition to management) require around 14 FTE posts (4 x peer navigators, 7 x Intensive/ HF workers, Admin (or outreach type role) to monitor people on the ‘watchlist’, SPOA, Trauma counsellor plus management costs. Please note, we are suggesting this as just one scenario in which an alliance of providers might propose delivering against this model, not a rigid requirement in the specification.

If commissioners are serious about a trauma-informed system, we would recommend that minimum requirements in relation to training, learning & development (both for staff directly delivering commissioned services, but also for non-commissioned services) should be included, along with IT/ data systems/ information sharing considerations, and lived experience input into design and performance management/ evaluation. Getting the right balance between quality and cost will be key (we heard from one provider that they had recently included a Trauma-informed Counsellor in a proposal which they then lost on cost).

Within the accommodation based services it is important that the therapeutic value is not lost. While many providers have adopted a concierge/ security model, this could lend itself to a contradictory message in a trauma informed environment. A skilled team providing ‘reactive support’ i.e. staff who are available to actively engage, promote safety and stability and respond to ad hoc needs for support within the short-medium term building-based supported housing offer. Those living in supported housing could also access planned and personalised support from any one of the types of support from the ‘menu’.

Risks

There are a number of risks here:

- Re-commissioning too quickly or too prescriptively without sufficient dialogue with existing commissioned and non-commissioned providers, peer mentors and people with lived experience. It takes time to grow a successful alliance, to establish shared values and build trust; to enable innovative solutions to surface. It would be better to pause/ enter a transitional period in the re-commissioning cycle in order to create

the space for this to happen than to rush it and end up with more of the same, enforced partnerships, damaged relationships, etc

- That this commission becomes the 'complex lives team' and creates yet another silo, with all the risks of gatekeeping, labelling, etc that can accompany this, especially within a context of stretched resources. This is not easy to mitigate, but the key seems to lie in:
 - Being clear from the outset about how this contract fits into the wider systems, where accountability lies and escalating blockages relating to individual cases and wider strategic learning to the operational/ strategic panels of the Safer Barnsley Partnership or, where risks are high and no services are succeeding in engaging with an individual, to the Adult Safeguarding Board.
 - Ensuring that the contract is connected – operationally as well as strategically - to the range of relevant preventative and proactive activities going on across the borough, e.g. to Public Health's work to identify and target those making repeat suicide attempts, those known to Community Policing but not yet to Housing Options (are or should some of this cohort be on the peer support navigators' radar?), young people coming through the Future Directions Panel, etc.

There are a number of questions to be ironed out:

1. Does this contract incorporate commissioning for younger people as well as for adults over 25?

Specialist younger people's projects are essential within this pathway. However, there are conversations to be had with providers regarding whether it is feasible/ desirable to include these as discreet projects within an alliance or whether these should be commissioned separately, with requirements for integration and communication (especially around transitions) with the wider pathway included in this specification. The current supported housing offer from Centrepoint is clearly valued by many young people and includes offers such as a therapeutic team, linked into CAMHS which align well with the vision set out here. We also heard that this congregate model did not work for others.

There may be advantages (both in terms of the streamlining of resources and the seamlessness of the offer) to including the current community support element of the young persons' contract within this wider alliance contract. This may also become clearer depending on whether or not there is appetite for joint commissioning of a specialist offer for the youngest cohort (including those leaving, or close to local authority care) and where this should sit in the proposed pathway.

2. Is the 'Intensive Support' team actually 'Housing First'?

Not necessarily. The two are different: intensive support in this model could apply to people not yet housed, or who are in non-commissioned housing. Housing First incorporates intensive support when required, but is quite distinct, having a number of elements which must all be present, all of the time, for it to be Housing First.

However, the potential advantages of including HF within the pathway are that:

- the Housing First offer would be embedded within the wider case-managed complex needs pathway, which reduces any disconnect from other services (and creation of a silo)
- The Housing First principles have relevance to this cohort across the whole pathway,
- Making it a distinct element of the contract ensures that it is targeted on the right people.

This model potentially recognises that some people need a more intensive offer, some or all of the time (and there may be movement between the less and more intensive offer and back) but that everyone will benefit from the principles of maximising choice, active engagement, strengths-based practice, etc.

There is a risk is that Housing First becomes diluted, or that low fidelity services are assumed to be Housing First. In our experience this can be mitigated by having a specific management function focused on delivering a high fidelity model, which, in turn, will deliver the positive outcomes with respect to tenancy sustainment that it has delivered in numerous services both here and internationally.

Another risk arises from how the contract is presented: it will be important to ensure that the capacity and experience to deliver such a contract is a competitive process - whether and how this is included within an alliance will take some time to negotiate.

If the service is going to be labelled 'Housing First', it is essential that it should have:

- Buy in from housing providers, so that individual choice and careful matching to properties is maximised;
- Appropriate levels of planning (what the principles look like in practice), and training and support for delivery teams; and
- A commitment from the local authority and its partners that ongoing funding will be secured to support a non-time-limited support offer.

3. What is the crossover with the Housing Options-led Covid Recovery Plan and this pathway?

The two systems should and do align but are they one and the same? The cohort and systems for the multiple and complex needs cohort and those for statutory homelessness clearly overlap but neither are fully contained within the other. A similarly structured and principled rapid re-housing pathway for wider homelessness would be our recommendation for the homelessness system, but further low-level and preventative elements will clearly be required within this wider offer. For example, a responsive and preventative floating support offer which can provide 'short sharp' interventions (e.g. around financial and practical issues) is essential to the functioning of the wider system, but should not be funded from the complex needs pathway. Likewise, there may be individuals who should appear on the at risk or 'watchlist' for the complex needs pathway, who are not (yet) on the Housing Options radar.